

**THE UNIVERSITY OF NORTH CAROLINA at ASHEVILLE
AUTHORIZATION TO TRAVEL**

IN-STATE [] <> OUT-OF-STATE [] <> OUT-OF-COUNTRY []

Individual Requesting Travel: _____

Other Employee/s Sharing Transportation: _____

Destination (s): _____

Date Travel Begins: _____ Date Travel Ends: _____

Purpose of Trip: _____

Subsistence - Meals: # of Days _____ @ \$ _____

Lodging: # of Days _____ @ \$ _____

I am requesting higher than per diem lodging rate for the following reason: _____

Transportation:

AirFare _____

Ground (Taxi, Limo, shuttle, bus, rental car, etc.) _____

Other (Parking, tolls, etc.) _____

Automobile Mileage _____ Miles @ \$ _____

Registration Fees: _____

Total Estimated Cost: _____

Fund Number: _____

Reimbursement Limited to: _____

Traveler's Signature

Date

_____ Approved _____ Disapproved

Supervisor's Signature

Date

Instructions:

1. Form to be completed by individual requesting travel.
2. Obtain Dept Head, Vice Chancellor approval (whichever is applicable).
3. Form will be returned to individual prior to travel.
4. Upon completion of travel, individual should attach original Travel Authorization with Travel Reimbursement Request.