

THE UNIVERSITY OF NORTH CAROLINA AT ASHEVILLE

Authorization for Travel

In-State/Out-of-State

Individual requesting travel: _____

Transportation: _____

Destination(s): _____

Date travel begins: _____ Date travel ends: _____

Purpose of trip: _____

Estimate Cost:

Amount:

Subsistence – Meals _____ Days @ \$ _____ _____

Subsistence – Rooms _____ Days @ \$ _____ _____

Transportation

Airline _____

Ground (taxi, limo, rental car) _____

Other (parking, tolls) _____

Automobile mileage _____ Miles @ \$ _____ _____

Registration Fee(s) _____ _____

Total estimate cost _____

Account Number: _____

Traveler's Signature

Date

Approved

Disapproved

Reimbursement limited to: _____

Department Head

Chancellor/Vice Chancellor

Instructions:

1. Form to be completed by individual requesting travel.
2. Obtain department head's approval and/or vice chancellor's or chancellor's approval (whichever is applicable).
3. Vice chancellor or chancellor will return form to individual.
4. Upon completion of trip, individual should submit approved travel request form with the travel reimbursement request.