

Travel Authorization Request Form

Please submit at least 2 weeks prior to travel to

Travis Jimenez (travis.jimenez@usu.edu)

Name: _____ A#: _____

Phone: _____ Email: _____

Dates of travel: From: _____ To: _____ Name of Conference: _____

Departing from: _____
City, ST

Destination: _____
City, ST Reason for Travel: Presenting/Meeting/Other

Project name: _____

Estimated costs:

Airfare:	
Mileage: reimbursed at \$0.61 per mile from USU to destination	
Lodging: (no incidentals)	
Parking & Transportation	
Per Diem: (less meals included in registration)	
Registration fees:	
Misc. Other (Baggage, Rental Car, etc.):	
International Travel Insurance	
Estimated total cost:	

Group Travel: For those who will be splitting any costs with other USU employees while traveling, or sharing lodging, the following is required:

Other Travelers in Group	A#

Approval of funding: _____

Index#: _____