

Travel Pre-Authorization Request

Traveler Information

total _____

*Traveler's Name _____ Preparer's Name (if not Traveler) _____

*Traveler's Email _____ *Is Traveler a US Citizen yes no

*Affiliation _____ description if Other _____ *Is Traveler an Employee yes no

*Affiliated Department/School/Center _____

*Departure Date _____ *Return Date _____

*Destination (city, state, country) _____

*Travel Request Type _____

[International Travel](#)
See link for additional information.
Attach Travel Authorization Petition and Travel Registration.

Trip Information

Conference Workshop Meeting Other _____

*Event Name/Description (no abbreviations) _____

Event Website _____

Event Start Date _____ Event End Date _____

*Purpose of Travel (check all that apply)

Present Paper Collaboration Professional Development Recruit Students

Recruit Faculty Present Poster Training Technical Session Fieldwork

Required by Agency _____ Other _____

*Benefit to UCF _____

Missed Obligations (class, office hours, meetings, etc.)
Explain how each instance will be covered.

Special Considerations

Check all that apply and review linked resources for more information. *Please complete and attach required forms. The Business Center will route forms for Dean and Provost approval.*

- [Over 30 Days](#) [Travel Advance Requested](#) [Field Advance Requested](#) + [Power of Attorney](#)
- [Group Travel Roster](#) [Export Control](#) [Restricted Destination](#)
- [Overnight stay within 50 miles of headquarters](#)

*Funding Source(s)

Include Worktags if possible. If unsure, please describe the funds. Explain any charge splitting or funding caps.

- Grant funds Grant and non-Grant funds no Grant funds

If using fund types listed below, attach the award information. (check all that apply)

- [University Travel Awards](#) [COS Research Travel Grant](#)
- I expect to be reimbursed by an outside organization and have reduced the amount from UCF.
- I expect an outside organization to pay for a portion or all cost and will arrange for UCF to be reimbursed.
- Student Government Award College of Graduate Studies (added directly to student account)

*Requested Travel Funds

Total Funds Requested _____

Registration		Per Diem (\$80/day)	
Airfare		Domestic Meal Allowance (\$36/day)	
Parking		Foreign Meal Allowance	
Mileage (\$0.445 per mile)		Car Rental	
Tolls		Fuel (for rental car only)	
Taxi/Rideshare		Internet/Business Calls	
Conference Hotel		Passport/Visa/Conversion Fees	
Non-Conference Hotel		Presentation Materials	

*Signatures

Traveler's Preparer's

_____ Signature _____ Date _____

UCF Faculty or Staff Member approver
This may be the traveler's supervisor, research advisor, grant PI, search committee chair, etc.

_____ Signature _____ Date _____

Chair or Director

_____ Signature _____ Date _____

_____ Budget Analyst review _____ Post Award review