

Authorization for Travel

(All faculty are required to submit for International Travel)

This form should be completed and submitted to cec@mst.edu five (5) days prior to travel.

Name:

Dates of Business Travel :

Destination:

Dates of Personal Travel:

International Travel – I have contacted International Affairs to ensure that I am informed of available resources, aware of potential risks, and in compliance with all rules and regulations. I have also attached the current Travel Advisory, which is at Level .

Domestic Travel

Purpose of Travel (One word is insufficient. Explain your objective, and defend this trip as more effective than a phone call, web meeting, telepresence, etc. Attach more documentation if needed):

Authority Delegate (If Applicable) Name and Contact Info:

Class Arrangements:

If Missouri S&T funds are being used please indicate the anticipated account and estimated percentage being charged to each below:

Source of Funds: Fund Name: MoCode: Estimated Funds:	Source of Funds: Fund Name: MoCode: Estimated Funds:
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Estimated Expenses:

Transportation Costs (including rental car, airfare, train, mileage (\$.37 x mile), etc.):

Registration Fee:

Hotel:

Meal Reimbursement:

Misc. Travel Expense:

Total Requested:

This trip is solely for the legitimate business purpose clearly outlined above.

I have clearly outlined above the legitimate business component of this trip, but I will be combining it with a personal trip. I have attached documentation showing how I will document and be compensated for my work time, as well as how I will account for paid and/or unpaid leave.

DATE: _____
Traveler

DATE: _____
Fiscal Manager, CEC

DATE: _____
My signature here indicates that I have reviewed this travel request in its entirety, I understand the nature of the travel as well as the content of the request, and I believe that this travel is in compliance with all relevant rules, including UM Policy 22601.
Department Chair