REQUEST FOR TRAVEL APPROVAL / ADVANCE  Trip # ______

Travel on University Funds Outside Santa Barbara Area

NAME OF TRAVELER: __________________________________________________________

EMAIL / PHONE #: __________________________________________________________

EMPLOYEE ID #: _____________________________________________________________

DEPARTMENT: __________________________________________________________________

1. FUNDS TO BE USED: ________________________________________________________

2. DESTINATION: __________________________________________________________________

3. DURATION (Dates of Trip): __________________________________________________________________

4. PURPOSE OF TRIP/JUSTIFICATION: ___________________________________________
   _____________________________________________________________________________
   _____________________________________________________________________________

5. ESTIMATED COST:

   Airfare - _____________
   Other Transportation - _____________
   Per Diem - _____________
   Other - _____________
   Total - $ _____________

REQUESTED BY: _____________________________ ___________________ (Date)

APPROVED BY: _____________________________ ___________________ (Date)

Authorized for payment by:

_____________________________ ___________________ (Date)
Department Chair

_____________________________ ___________________ (Date)
Dean

EMPLOYEE DEVELOPMENT (Workshops, courses, seminars) (Staff Personnel Only)

_____________________________ ___________________ (Date)
Department MSO

NOTE: Copy of approval must accompany Request for Travel Advance, Travel Voucher, or payment to travel agency, whichever is submitted first.

When submitting to Dean’s office, please type in triplicate.

This form not for use for recruitment purposes; please use “Request for Travel Approval for Recruitment Purposes.”