University of Massachusetts Amherst

Pre-Travel Authorization

Must be completed prior to confirming travel arrangements and submitted with TRIP form in order to be reimbursed for travel expenses.

Prior written or electronic supervisory approval is required for university travel and must be submitted with travel reimbursement forms (TRIP forms).

TRAVELER: _____ **TITLE:** _____
(Last) (First)

TRAVELER'S EMPLOYEE NUMBER: _____

HOME ADDRESS: _____
DESTINATION: _____

DATE OF DEPARTURE: _____ **DATE OF RETURN:** _____

PURPOSE OF TRIP: _____

OTHER COMMENTS: (importance of trip/consequences if not funded, coverage of duties while absent, etc.)

_____

_____

ESTIMATED COST: $_____ **AUTHORIZED REIMBURSEMENT: $**_____

FUNDING SOURCES: _____

_____ _____ _____
Traveler's Signature *Immediate Supervisor's Signature*

_____ _____
Date *Type/Print Name*

Title: _____ *Date*: _____

VICE CHANCELLOR/PROVOST APPROVAL REQUIRED FOR NON-FACULTY TRAVEL:

_____ _____
Vice Chancellor/Provost or authorized designee Date

Optional Detail

Expense Type	Note	Amount
Airfare		$
Hotel/Lodging		
Conference Fee		
Other		
Total		$

1-Send original with TRIP form to the Controller's Office 2-Retain Copy for your records