

Travel Information and Approval Form

Department of Mathematics – Internal Use Only

Submit via email to Amy prior to trip.

Traveler Information

Traveler Name and Address:

Trip Destination

City, State: _____

Country: _____

Departure Date: _____

Return Date: _____

Do the defined departure and return dates include any portion of personal travel?

☐ Yes ☐ No

If yes, please define the dates considered business travel:

Business Begin: _____

Business End: _____

Trip Essentials

Name of Conference or Trip Description:

Purpose of Travel (select one):

☐ Conference/Professional Development

☐ Presentation

☐ Research

☐ Team/Group Travel

☐ Other (please explain): _____

Justification for Business Travel (select one):

- ☐ Attendee/Participant
- ☐ Presenter
- ☐ Other (please explain): _____

Contact Method (select all that apply):

- ☐ Email: _____
- ☐ Cell Phone: _____

Expenses Will Be Paid By (select all that apply):

- ☐ Grant: _____
- ☐ International Programs: \$ _____
- ☐ Personal Funds
- ☐ Other (please explain): _____

Courses and Meetings Missed During Academic Term (include arrangements for instruction):

Trip Comments (optional):

For Students Only

Destination Address for Emergency Contact:
