# Travel Authorization Request

**Travel Request Date:**

**Travel Request Number:**

**Employee Name:** ____________________________  **R #:** ____________________________  **Title:** ____________________________

**Faculty**  **Staff**  **Unit Name:** ____________________________

**Fund:** ___________  **Org:** ___________  **Acct:** ___________  **Pgm:** ___________  **Phone Ext:** ___________

**Non-faculty only**  **Request for Approval for Attendance at Events**  **form received**  **☐**

**Reason for Travel:** ____________________________

**Departure Date:** ____________________________  **Return Date:** ____________________________

**Destination:** ____________________________

**Other Employees Traveling:** ____________________________

<table>
<thead>
<tr>
<th>Travel Description</th>
<th>Estimated Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Means of Travel</strong></td>
<td><strong>Reimbursement</strong>  <strong>P Card Charge / Purchase Order</strong></td>
</tr>
<tr>
<td>☐Air  ☐Rail  ☐Car Rental  ☐Personal Vehicle  ☐College Vehicle</td>
<td></td>
</tr>
<tr>
<td>Personal/College Vehicle: Estimated Mileage: ____________________________</td>
<td></td>
</tr>
<tr>
<td>College Vehicle: Dates Needed: ____________________________</td>
<td></td>
</tr>
<tr>
<td>Car Rental: Dates Needed: ____________________________</td>
<td></td>
</tr>
<tr>
<td><strong>Hotel</strong></td>
<td></td>
</tr>
<tr>
<td>Dates Needed: ____________________________</td>
<td></td>
</tr>
<tr>
<td><strong>Meals</strong> (enter number of each required)</td>
<td></td>
</tr>
<tr>
<td>Breakfast: ___________  Lunch: ___________  Dinner: ___________</td>
<td></td>
</tr>
<tr>
<td><strong>Other Costs</strong> (explain fully)</td>
<td></td>
</tr>
</tbody>
</table>

**Reimbursement Amount**

**Total Cost of Trip (Reimbursement + P Card)**

**Approved Amount**

_________________________/________________________
Print Name  Signature
Approved Expenditure – Unit Head

_________________________/________________________
Print Name  Signature
Approved Expenditure – Division VP

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*New Jersey’s Public Liberal Arts College*

*Form 78(12/2011)*
Request for Approval for Attendance at Events  
Faculty Use Only  
Approval from Employee Relations NOT Required

Name: 

School: 

Title: 

Telephone #: 

Ext #: 

Event: 

Sponsor: 

Event Location: 

Event Date: 

Overnight accommodations required? YES [ ] NO [ ]

Out-of-state travel required? YES [ ] NO [ ]

Estimated Cost: 

College to pay cost? YES [ ] NO [ ]

Sponsor to pay cost? YES [ ] NO [ ]

Employee to pay cost? YES [ ] NO [ ]

Reason for attendance: 

Has sponsor offered an honorarium or fee? YES [ ] NO [ ] Amount: 

Employee Signature 

Date 

Class Coverage? YES [ ] NO [ ] Please describe: 

Comments: 


Dean Signature 

Date 

NOTE: This form must be retained in the School for five (5) years.

JF 5/2010