

****TRAVEL AUTHORIZATION FORM****

****1. Employee Information****

- Name: _____
- Employee ID: _____
- Department: _____
- Position: _____

****2. Travel Details****

- Destination: _____
- Purpose of Travel: _____
- Departure Date: _____
- Return Date: _____

****3. Funding Information****

- Estimated Travel Costs: _____
- Funding Source: _____

****4. Supervisor Approval****

- Supervisor Name: _____
- Signature: _____
- Date: _____

****5. HR/Administration Approval****

- HR/Administration Name: _____
- Signature: _____
- Date: _____

****6. Special Instructions or Notes:****

****7. Acknowledgment****

I acknowledge that I have read and agreed to the travel policy guidelines.

- Employee Signature: _____
- Date: _____

****End of Form****