

**PSYCHOLOGY PRE-APPROVAL TRAVEL FORM
NON-STUDENT**

NAME: _____ UIN: _____

PURPOSE OF TRIP: _____
(If conference travel, a hard copy of the itinerary needs to be provided.)

DESTINATION: _____

BEGINNING DATE OF TRAVEL: _____ TIME: _____

ENDING DATE OF TRAVEL: _____ TIME: _____

EXPENSES REIMBURSED BY UNIVERSITY ACCOUNT: ____NO ____YES

If yes, source of funds will be:

Department: \$ _____ CFOP number to charge: _____

Grant: \$ _____ CFOP number to charge: _____

Other: \$ _____ CFOP number to charge: _____

CAR RENTAL: ____NO ____YES

AIR FARE: ____NO ____YES (If yes, you will need to submit your boarding passes and itinerary.)

IF YOU ARE USING FEDERAL FUNDS FOR FOREIGN TRAVEL, A U.S. AIR CARRIER NEEDS TO BE USED IN ORDER TO BE REIMBURSED.

COVERAGE OF DUTIES DURING ABSENCE:

COURSE #: _____

DATES: _____

ARRANGEMENT: _____

SIGNATURES

Requester's Signature: _____ Date: _____

Project Director/Supervisor Name (print): _____

Project Director/Supervisor Signature: _____ Date: _____

Dept. Head (or designee) Approval: _____ Date: _____

College Approval (if needed): _____ Date: _____

Return completed form to David Irwin, Rm. 315 Psychology, MC-716.