

**PSYCHOLOGY PRE-APPROVAL TRAVEL FORM
STUDENTS**

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:** _____

MUST MARK ONE:

Who is receiving the primary benefit of this travel?

_____ University is receiving primary benefit (student asked to travel as a University rep to conference/competition)

Or

_____ Student receives primary benefit (the travel aided in the pursuit of a student's studies or research)

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**

Airline Travel: **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 Susan Garnsey, 321 Psychology, MC-716.