OSWEGO STATE UNIVERSITY OF NEW YORK

T1
Travel Approval Request

Travel Req #	
Acct. #	

Travelers must obtain all required signatures prior to travel for internal approvals, procedural compliance and cost-effective trip planning. Send completed original signed copy with your reimbursement voucher or travel card statement to the Travel Office, 401 Culkin Hall. If you're not submitting a reimbursement voucher or travel card statement, please still forward the signed T1 to the Travel Office as a record of your travel status.

PART I – To Be Completed by the Traveler

Traveler Information

Name (Last, First, MI): _____ Title: _____

Department: _____ Phone: _____ Date: _____

Purpose for Trip: _____

Destination (City, State): _____

Departure: _____ Return: _____

Date Date

Anticipated Expenditures — Totals

Registration: _____

Transportation:

☐ Rental Car: Confirmation #: _____ Location: _____ _____

☐ State Vehicle: _____ miles @ _____ /mile $ 0.00

☐ Airfare: _____

☐ Train: _____

☐ Personal Car Mileage: _____ miles @ _____ /mile $ 0.00

Lodging:

☐ Receipted (per diem) _____ days x _____ /day $ 0.00

☐ Un-Receipted: _____ days x _____ /day $ 0.00

Meals:

☐ Per Diem (overnight): _____ days x _____ /day $ 0.00

☐ $5/$12 (day trip): _____ breakfast(s) @ _____ /instance $ 0.00

_____ dinner(s) @ _____ /instance $ 0.00

Incidental Expenses:

Parking: _____ Taxi: _____ Tolls/Bridges: _____ Subway: _____ $ 0.00

Internet: _____ Gas: _____ Other (explain): _____ $ 0.00

Total Anticipated Cost of Trip: $ 0.00

PART II – Approvals

Persons who travel before obtaining approvals do so at their own risk and may not be reimbursed for their travel costs.

Traveler (required) **Date**	**Traveler's Immediate Supervisor** **Date**
***Dean** **Date**	****Divisional Vice President** **Date**

*Dean's approval is required for ALL faculty travel

**VP approval is required for ALL out-of-state travel