



Pre-approval/Authorization for Travel

Name: \_\_\_\_\_ ID #: \_\_\_\_\_

Purpose of trip: \_\_\_\_\_

Date	From	To	Hr of Depart	Hr of Return

**Attach meeting or conference agenda with dates and times of function.**

ENMU Vehicle (must have taken defensive driving course): available \_\_\_\_\_ unavailable \_\_\_\_\_

Personal Vehicle: \_\_\_\_\_ miles @ \_\_\_\_\_ per mile = \_\_\_\_\_

Overnight stay required: yes \_\_\_\_\_ no \_\_\_\_\_ (Hotel should be put on your purchasing card. If not available, you must turn in your receipt in order to be reimbursed.)

Meal Allowance:        4.0 - 5.9 hours        \$ 6.50  
                                  6.0 - 11.9 hours        \$15.00  
                                  12.0 - 24.0 hours        \$30.00

How many meals will be provided: Breakfast \_\_\_\_\_ lunch \_\_\_\_\_ dinner \_\_\_\_\_ none \_\_\_\_\_ unsure \_\_\_\_\_  
 Reduce meal allowance by...        (\$6.50)        (\$8.50)        (\$15.00)  
 (Continental breakfasts and receptions do not require a reduction in meal reimbursement)

**Total Estimated Cost:**

Transportation		Airfare	
Hotel		Other	
Meals		<b>Total</b>	

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

President Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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 \*Don't forget to keep all itemized receipts.

\*Complete the "Travel Voucher" within 5 days of return and attach this form as well as itemized receipts and agendas.