

APPLICATION FOR BUSINESS TRIPS

Name: _____	
CPR-number.: _____	
Destination: _____	
Purpose of the travel: _____	
<i>Invitation and/or program <u>must</u> be enclosed</i>	
Date of departure: _____	Date of return: _____
Active obligations: _____	
Travel budget:	
Transport	art: kr. _____
Hotel	kr. _____
Diets	kr. _____
Other	kr. _____
Total travel costs	kr. _____
Financing:	
Paid by organizer – who? _____	
EU-fundings No Yes	
Is there applied for external funding?	
No Yes – from where? _____	kr. _____
Amount applied from the Department:	kr. _____
Date: _____	_____
Signature by applicant	
Amount approved for the business trip	kr. _____
Accept of the application is conditional on a co-financing from external funding	kr. _____
Date: _____	_____
Signature by the head of department	