

REQUEST FOR TRAVEL APPROVAL
Travel on University Funds Outside Santa Barbara Area

NAME OF TRAVELER _____

EMAIL _____ DEPARTMENT _____

EXISTING VENDOR ID FOR TRAVELER (if applicable): _____

If no vendor ID, please list mailing address: _____

1. PROJECT CODE: _____

2. DESTINATION/DURATION (dates of trip): _____

3. PURPOSE OF TRIP/JUSTIFICATION: _____

4. ESTIMATED COST (the estimated costs you'll list below must be max you anticipate charging:

Transportation _____

Meals _____

Lodging _____

Foreign Per Diem* _____

Total _____

SIGNATURES:

REQUESTER _____

Date _____

PI APPROVAL _____

Date _____

DEPT APPROVAL _____

Date _____

Date _____

NOTE: *Per diems are authorized for all foreign travel; travel within Alaska, Hawaii, and all U.S. possessions, and continental U.S. travel lasting more than 30 days. Do not complete for travel in the 48 continental U.S.; use Meals and Lodging.