

# SAMPLE FACULTY DEVELOPMENT



## Pre-Approval Travel Request

### Traveler

**Name:** Your Name **Department:** Faculty Development  
**State Employee ID:** 0 0 0 X X X X X X X **Fund:** 10001  
**Home Address:** Your Home Address **Org:** T20007  
**Are you a State Official or Employee?** -Select One- **Program:** 144500  
**Official Duty Station:** -Select One- **Grant:**

### Travel Information

**Detailed Nature of Business:** What will you be presenting? Where will you be presenting?  
**Date of Departure:** **Date of Return:**  
**Departing From:** **Traveling To:**

### Estimated Traveling Expenses

	Paid by Traveler	Direct Paid by NSU	Comments:
Airfare:	0.00	0.00	
Baggage Fees:	0.00	0.00	
Registration:	0.00	0.00	
Lodging:	0.00	0.00	
Motor Pool:		0.00	
Mileage:	0.00		
Per Diem:	0.00		
Rental Car:	0.00	0.00	
Local Transportation:	0.00	0.00	
Miscellaneous:	0.00		
	\$ 0	\$ 0	
<b>Trip Total</b>		<b>\$ 0</b>	

**This document was prepared by:**

**Extension:**

Your Signature

\_\_\_\_\_  
Signature of the Traveler

\_\_\_\_\_  
Date

Leave Blank for Assistant VPAA's Signature

\_\_\_\_\_  
Account Sponsor

\_\_\_\_\_  
Date

By signing, the Account Sponsor certifies that funds are available to cover expenses.

(If the traveler is the account sponsor, the supervisor's signature is required.)

If the amount claimed on the travel voucher is greater than the approved Trip Total on the pre-approval request, the traveler must adjust the appropriate expense line (ie. airfare, registration, ect) and have the account sponsor initial next to the changes.

### Returning from the trip

I certify that I did use the above direct purchase airline ticket for my approved travel.

\_\_\_\_\_  
Signature of the Traveler

\_\_\_\_\_  
Date