

**THE UNIVERSITY OF ALABAMA IN HUNTSVILLE
 AUTHORIZATION FOR OFFICIAL TRAVEL
 FOR PERSONNEL IN ACADEMIC AFFAIRS UNITS**

Traveler's Name: _____ Date of Request: _____
 Destination: _____ Dates of Trip: _____
 Primary Mode of Travel: _____ Reason for Making Trip: _____

Arrangements for Classes: _____

Estimate of Cost:	Special Notes:
Air Transportation Ground Transportation: Lodging Meals Registration Miscellaneous Total	

Traveler's statement: "If university-controlled funds are accepted for this travel, I am aware of and fully responsible for following university travel policy. I certify that the travel is a part of my official and/or professional responsibilities. I acknowledge that I must gain approval of my supervisor for arrangements for official duties that will be missed."

	Traveler	Date
Approval of Expenditure and Guarantee of Funds:	Max. \$ Amt. for Reimbursement: 1st Acct. .	Other Accts.
1st Acct. Name/No	Auth. Signature/Date _____	
2 nd Acct. Name/No.	Auth. Signature/Date _____	
Other Acct(s). Charged	Auth. Signature(s)/Date(s) _____	

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**THE UNIVERSITY OF ALABAMA IN HUNTSVILLE
ALTERNATIVE ARRANGEMENTS FOR OFFICIAL DUTIES
FOR PERSONNEL IN ACADEMIC AFFAIRS UNITS**

This form should be used by GTAs, part-time and full-time faculty, and professional staff to detail arrangements made for offic

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