**Student Travel Authorization Quick Step Instructions:**

The Student Travel Authorization is to be approved prior to any student trip and at least one week before travel departure date. This form is to be used for trips over 25 miles from the University.

**Section I: Trip Information**

1) Complete all trip information as requested.
2) The responsible University faculty/staff person is the Trip Leader who is assisting the students with their trip.

**Section II: Estimated Expenses**

Original itemized receipts are required for reimbursements. Receipts must list each item purchased.

1) Estimate all expenses to be incurred and indicate the method of planned payment.
2) Vehicle expenses:
   a) Groups are required to pay for the fuel charges.
   b) If you are using the University bus, please inquire for the estimated cost for the driver when reserving the bus.
   c) Contact the Purchasing Office to reserve a rental car and to obtain the cost of the rental vehicle.
3) Meal reimbursement is based on per diem or receipts.
   a) Receipts are required for reimbursement.

**Section III: Student Information**

1) Complete all student information as requested.
2) Students intending to drive need to check the box as requested.
   a) Van drivers must be 25 years old.
   b) A valid driver’s license is required to operate a state, private, or rental vehicle while on University travel.

After completing Sections I, II, and III, please submit document to the Student Activities Office to complete Section IV.

**Section IV: Funding Sources and Authorizations**

1) The Student Activities Office will route for all of the appropriate approval signatures.
Student Travel Authorization

Student Travel Authorization is to be approved prior to any financial obligation and at least one week before travel departure date. This form is to be used for trips over 25 miles from the University.

Section 1. Trip Information

Check applicable: □ In-State □ Out-of-State □ International

Type of Travel: □ Class Field Trip □ Student Organization □ Student Travel With Faculty □ Student Travel Without Faculty □ Athletics □ Other

Travel Destination: ________________________________________________________________

Departure Date: ____________________ Return Date: ____________________

Responsible University Faculty/Staff Person: ____________________________________________

Cell Phone Number: ______________________________________________________________

Describe the reason for travel. Attach a copy of the event agenda or brochure.

Destination hotel name and phone number: ____________________________________________

Section II. Estimated Expenses

Estimate all expenses to be incurred and indicate method of payment

Transportation: □ Van □ Bus □ Rental Vehicle □ Other: ____________________________

Fuel Cost: __________________________

Rental Cost: ________________________

Lodging:

Number of nights _______ x $____________/night = $____________

Meals:

# meals __________ x # participants = $__________________________

Other:

Conference Registration $__________/person = $__________________________

Other _________________________________________________________________

Total Estimated Trip Expenses: $___________________________________________

Upon return from the trip, original receipts, a payment voucher and any unused cash advances must be submitted to the Student Affairs Office within two business days.
**Section III. Student Information** – Please Print or Type.
List all participants going on the trip. (Attach additional pages as necessary). Please check the box next to the names of drivers. If not previously completed, driver(s) must submit a copy of their valid driver’s license annually.

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Any changes to this roster prior to departure must be communicated to the Director of Student Activities.

**Section IV. Funding Sources and Authorizations** – To be completed by the Office of Student Activities for Student Organization trips.

Account number: __________________________  Amount: $____________
Account number: __________________________  Amount: $____________
Account number: __________________________  Amount: $____________

________________________________________  __________________________
Director of Student Life Signature          Date

________________________________________  __________________________
Executive Director of Student Affairs /Campus Dean Signature Date