

Travel Authorization Form – Department of Biology (UF Employee)

Please complete all fields and email to fiscal@biology.ufl.edu

Traveler Information	
Name	
UF ID	

Trip Information	
Destination (City, State Country)	
Name of Conference (if applicable)	
Departure Date/Time (hh:mm am/pm)	
Return Date/Time (hh:mm am/pm)	
Business Purpose	
Dates of Personal Travel (if applicable)	

Estimated Expenses for Trip			
	Amount		
	P-Card	Out of Pocket	No charge
Airfare			
Map Mileage (personal vehicle) – include map printout			
Rental Car			
Fuel for Rental Car			
Lodging (number of nights:))			
Registration Fee (if applicable)			
Membership Fee (if applicable)			
Parking			
Taxi/Shuttle Services			
Meals			
Other:			
Other:			

Are your purchases made by someone else's pcard? If yes, name of PCard holder: _____

PER DIEM: Will you be claiming per diem (\$80 per day) in lieu of lodging AND meals? YES NO

UF PROJECT NUMBER TO BE CHARGED (Required) _____

Lodging: Are you sharing a room? If so, please provide their name and email address: _____

To be completed by UF Students	
E-Mail Address	
Name of PI responsible for funding this trip	
Name of Award being used (if applicable)	
Approved budgeted amount for this trip	
PI Signature (required!)	

For fiscal office use only:

TA Number _____

Date Submitted _____