Travel Authorization Request
WORKSHEET

Traveler: ____________________________   UFID: ____________
Conference: ___________________________________________________________
Destination: ___________________________________________________________
Dates of Trip: ________________   Through: ________________
Time of Departure: ___________ AM/PM   Time of Return: _________ AM/PM

Purpose of Trip:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Explain how your trip will benefit UF and Linguistics:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

International Travel
**If you are planning on traveling internationally (including Canada) you must visit: http://www.ufic.ufl.edu/travelregistration.html to register for MEDEX

Please check here once you’ve completed MEDEX registration for international travel

Estimated Expenses:
Please check applicable items and estimate cost:

  _____ Airfare $ _______________  
  _____ Registration ____________________
  _____ Lodging ________________________
  _____ Meals ($/day depends on location) ________________
  _____ Per Diem @ $80/day in lieu of lodging & meals ________________
  _____ Car Rental ________________________
  _____ Mileage (private vehicle) ________________
  _____ Incidental Expenses ________________
  _____ Other ________________________________

  TOTAL: _________________

Please provide name of department or account(s) to charge if you’re getting funding from another department/grant/etc.: