



PRIOR AUTHORIZATION Travel Request Form (policy 1303)

Traveler's Name: _____

Conference/Location Attending _____

Travel to: City/State/Country _____

Purpose of Travel: _____

Dates of Travel: _____

Substitute teaching covered by: _____

All business travel must support the mission of the University of North Carolina, receive the appropriate approvals, and be carefully planned to ensure that expenditures are necessary, prudent, and as economical as possible.

For conference registration fees that will be paid by UNC, please include a paper copy of the completed registration form. What is the payment due date for the registration fee? _____

Will you be submitting expenses for reimbursement? YES NO

(NOTE: Reimbursement details must be submitted within 5 business days of return from your trip.)

For International Travel Only:

Will you have non-UNC travel insurance coverage? YES (may require waiver form) NO

If no, how will the UNC coverage be paid? UNC Acct/Fund _____ Direct payment by _____

**If you are traveling internationally you are required to log your trip in the UNC Global Travel Registry. <http://globaltravel.unc.edu/login.cfm> This registry is to facilitate communication with members of the Carolina community who may find themselves in an international crisis situation and to provide assistance.

Traveler's Signature

Date

Approved by:

James B. Rives, Chair, Department of Classics

Date

Office Use: C# _____ T# _____ Insurance processed _____

Updated 4/29/16