

COLORADO SCHOOL OF MINES

Travel Authorization

Report Name Format: Initials (LastFirst), Departure (MMDDYY),
Dept. Abbreviation Example: QA060619MAPS

TA

Accounts Payable use only:

IDOC #:

TDX #:

Date

Initials

Traveler (Last, First)		CWID (If none attach W9)		Estimated Expenses			
				Please include the estimated costs for both your out-of-pocket & prepaid expenses so the entire trip budget is being approved.			
Title (Affiliation to Mines)		Department		Reimbursable/Out-of-Pocket Expenses			
				Per Diem	Daily Rate	Days	Total
Travel Dates		Departure Date		Return Date			
(For multiple locations please detail specific dates for each destination in the Purpose below)							
Destination(s) (City and State or Province and Country)				Mileage	Fixed Rate	Miles	Total
				Airfare		CISI Insurance	
				Lodging		<i>List Additional Expenses on the 3 lines below and describe.</i>	
				Registration			
				Ground Transport			
				Parking			
Purpose and Justification of Travel (For research projects, provide justification as it pertains to the index charged)				Total Reimbursable Amount			
				University or Prepaid Expenses			
				Prepaid items would include any expenses paid on a University One Card or booked through the University preferred Travel Agency			
Additional Travel Details				Airfare		<i>List Additional Expenses on the 3 lines below and describe.</i>	
Will any students be participating in this travel?				Lodging			
If yes have you completed the Clery Act Forms?				Registration			
				Rental Car			
				Total Prepaid Amount			
				Cash Advance Request			
				\$1500.00 maximum per person.			
				NOTE: Cash advances are normally available one week before travel occurs. All exceptions must be approved by the Controller.			
				Cash Advances may be requested only for anticipated Out-of-Pocket expenses that will be incurred while IN travel status. All requests must be submitted at least 10 business days before you trip begins.			
				Total Trip Budget: Reimburse & Prepaid			
Certification (please read below before approving)							
I certify that the statements in this report are true and correct in all respects; that payment of the amounts claimed herein has not and will not be reimbursed to me from any other source; that travel performed for which a cash advance or reimbursement is claimed was performed by me while on official school business and that no claims are included for expenses of a personal or political nature or for any other expenses not authorized by Mines Financial Policies; and that I actually incurred or paid the operating expenses of the motor vehicle for which reimbursement is claimed on a mileage basis. Further, I hereby authorize the School to deduct from my pay any amount paid to me in excess of my authorized expenses as provided by Mines Financial Policies.							
Traveler (Type Name)		Preparer (if not traveler) (Type Name)		Accounts Payable			
The following are necessary only when required for International Travel, Sponsored Grant funding, and or multiple indices.							
International Office/Provost (Associate)		Additional Department Head/Financial Manager		Research Administration			