



The University of Akron  
**Buchtel College of Arts  
 and Sciences**

**TRAVEL AUTHORIZATION**

This form is to be completed prior to incurring any travel expense. Actual expenses are to be submitted for reimbursement through Workday as soon as possible after completion of travel. \*Remember to attach all receipts including food. This form must be completed if your travel is expected to be overnight or out-of-state.

Date Prepared: \_\_\_\_\_ For (Person): \_\_\_\_\_

Attending: \_\_\_\_\_

Where: \_\_\_\_\_ When: \_\_\_\_\_

Expense Estimates:

Transportation:	\$ _____	Account Code(s) to charge expenses:
Lodging:	\$ _____	_____
Meals*:	\$ _____	_____
Other:	\$ _____	
TOTAL	\$ _____	

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*To be completed by Chair/Director:*

*(If request is for a Chair/Director submit form to the Dean's office for approval)*

Amount approved: \$ \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

*Please send a copy of this completed form, with signatures, to Vivian Campbell in the Dean's Office at vgc1@uakron.edu, copying the requester. The unit should keep the original.*