



The University of Texas at Tyler
Request for Approval of Travel

Name: _____

Destination: _____

Dates of Travel: _____

Mode of Transportation (Air, Auto, etc.): _____

Purpose of Travel:

Empty rectangular box for Purpose of Travel

Faculty class time arrangements: _____

Est. Time of Departure: _____

Est. Time of Return: _____

Estimated Cost of Travel:

Table with columns: EXPENSE, # of miles, \$ per mile, # of nights, \$ per night, # of days, \$ per diem, Registration Fees, Other Expenses, TOTAL FUNDS TO BE ENCUMBERED: COST

* Check the following website for current travel rates: https://fmx.cpa.state.tx.us/fm/travel/travelrates.php

** Please note: All flights must be checked through Corporate Travel Partners FIRST, to determine if a better deal for the university is available.

Departmental share of cost: \$ _____
Amount requested of deans' office: \$ _____
Amount from other sources \$ _____

Approvals:

Dean's Commitment _____ Date _____

Budget Authority _____ Date _____

Requester Signature _____ Date _____