

**MATERIALS DEPARTMENT
UNIVERSITY OF CALIFORNIA, SANTA BARBARA**

DEPARTMENT TRAVEL PREAPPROVAL FORM

Name of Traveler: _____

Funds to be Used: _____

Dates of Trip: _____ to _____ Destination City: _____

Personal Time*? Yes No Dates of Personal Time: _____ to _____

Business Purpose of Trip: _____
(Conference or Meeting Name)

Estimated Cost: Completed to the best of your knowledge.

Airfare: \$ _____

Transportation: \$ _____
(rental car, taxi, car mileage^)

Lodging: \$ _____
(\$333 night maximum room rate**)

Parking: \$ _____

Registration: \$ _____

Other: \$ _____

Meals & Incidentals: \$ _____
(\$79 day maximum allowance**)

Total: \$ _____

Travel Advance Needed?
Yes No

Travel Advance Amount:
\$ _____

Signatures: _____
Traveler

_____ Date

_____ Advisor / Supervisor / Host

_____ Date

Funding Approval (Financial Manager) and Department Approval (MSO) Entered in Concur.

*Taking personal time around business travel requires extra documentation for reimbursements.

**Allowable expenses for lodging and meals & incidentals varies in Alaska, Hawaii and internationally.

^The reimbursement rate for the use of a private automobile for University business is 67 cents a mile.
Refer to Policy G-28 for more information.