

Travel Authorization and Travel Reimbursement Form

Please fill out the information below and return to krista.bradley@colorado.edu, or fax to 303-492-7317. This form must be completed and fully approved before making travel arrangements. When you return from your trip this form will be used to assist us with your reimbursement. Please remember to submit all receipts when you return from your trip.

Part I General Information

Name of Traveler _____

Travel Start Date _____ Travel End Date _____

Origination _____ Destination _____

Speedtype 1: _____ Speedtype 2: _____

Part II Travel Justification

1) Reason for trip; 2) If travel is on a sponsored project: how this supports the objective of the project 3) If applicable: Conference name (no acronyms), conference date, title of paper presented

Part III Estimated Expenses (best estimates or actual costs if known)Airfare \$ _____ Booked through Concur? YES ☐ NO ☐

Required: If not booked through Concur, please include a quote from Concur or Christopherson Business Travel that shows the flight you purchased is less than the same flight offered through Concur or Christopherson.

Lodging \$ _____ Registration \$ _____

Number of Days for Meals _____ OR Dollar limit on per diem request \$ _____

(Meals will be reimbursed based on per diem rates. If including dollar limit per diem will be paid up to this amount)

Transportation (parking, mileage, rental car, etc.) \$ _____

Miscellaneous \$ _____

Itemized receipts & proof of payments required (with the exception of meals if claiming per diem)

Part IV Signatures

Traveler _____ Date _____

PI Approval _____ Date _____
(Other than PI travel)

Dept Approval _____ Date _____

CEAE Department Use Only

Speedtype _____

Total Estimated Expenses _____ Funds Available _____