



REQUEST FOR TRAVEL PRE-APPROVAL
 Travel on University Funds Outside Santa Barbara Area
(to be filled before travel)

Type of Travel:

- Conference Presentation
 Graduate School Visitation (if admitted only): Interview Visitation Day

NAME OF TRAVELER _____

DEPARTMENT _____

1. DESTINATION _____

2. DURATION (Dates of Trip) _____

3. PURPOSE OF TRIP/JUSTIFICATION _____

4. ESTIMATED COST:

Registration	\$ _____	
Transportation	\$ _____	<i>If traveling by personal vehicle reimbursed by mileage, at approx. \$.5/mile.</i>
Lodging	\$ _____	<i>Per UC Policy, hotel rates capped at \$275 per night before tax and fees.</i>
Meals	\$ _____	<i>Meals may be reimbursed up to \$62/day, alcohol excluded.</i>
Other	\$ _____	<i>Please note other:</i>
Total Requested:	\$ _____	

REQUESTED BY _____
 Student Signature _____ Date _____

APPROVED BY _____
 Faculty Director/Associate Director _____ Date _____

FOR OFFICE ONLY

Approved Denied Incomplete

Funding Source: Amount Approved:

Current Balance: Final Balance: