

Form 802f1

ADMINISTRATIVE FORM

TRAVEL AUTHORIZATION REQUEST

Name:	Today's Date:	
Date and time of Proposed Travel:		
Begin absence date:	Time:	
Return to work date:	Time:	
Mode of Travel:	Total Hours requested:	
Purpose for Absence:		
Prof. Conference	Visit to another Library	
Directed Travel	Prof. Meeting/Training	
Conference Sponsor, Location and Subject of travel		
Estimate of expenses from Library Budget:		
Lodging		
Meals (IRS locale per diem rate)		
Transportation/Mileage		
Registration & fees		
Miscellaneous expense		

Employee Signature:	Date:
Director's Signature:	_ Date:
(For Director's Travel) Board Signature:	
Date:	
Effective: 3/11/2005	

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