**Traveler must complete this form and receive all approvals** **BEFORE incurring expenses related to the travel request**.

**Request for International Travel**

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| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Title/Rank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| EKU ID: ­­­­­­­­­­­­­­­­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Campus Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

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| Destination: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | | --- | --- | | **ESTIMATED** Expenses | | | Travel: Select one | $ \_\_\_\_\_\_ | | Lodging: | $ \_\_\_\_\_\_ | | Meals: | $ \_\_\_\_\_\_ | | Registration: | $ \_\_\_\_\_\_ | | Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_ | | TOTAL: | $ \_\_\_\_\_\_ | | LIMIT (if any): | $ \_\_\_\_\_\_\_\_\_\_ | |
| Travel Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Purpose of Trip *(do not abbreviate)***:**  Click or tap here to enter text. |

\*Personal automobile not to exceed coach airfare; provide airfare quote for travel dates. If requesting a rental car, please attach justification.

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| **Group Travel** (For group travel, all applicable international travel requests should be submitted together.) |
| **Does any portion of the trip include students and/or other faculty/staff**? Select one. |
| IF YES, who is coordinating the group travel? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **NOTE**: For group travel, the travel request must include a memo from the coordinator of the group travel that describes (1) the justification for group travel, (2) the number of EKU faculty/staff requesting to participate, (3) a list of all individuals planning to participate, and (4) the estimated total cost to EKU for the group travel. |

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| Traveler: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Financial Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Org. Code: \_\_\_\_\_\_\_\_\_\_ | Acct. Code: \_\_\_\_\_\_\_\_\_\_ | Amount: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Dean/Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Education Abroad Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(Travel that includes students should be approved by the Education Abroad Director before going to the Provost.)* | | | | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Executive VP for Academic Affairs & Provost: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Approved requests are forwarded to Accounting and copied to the traveler, the dean/director, and the Executive Director of Public Safety & Risk Management.

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| Additional Financial Manager(s) *(if applicable)*: | | | | |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Org. Code: \_\_\_\_\_\_\_\_\_\_ | Acct. Code: \_\_\_\_\_\_\_\_\_\_ | Amount: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Org. Code: \_\_\_\_\_\_\_\_\_\_ | Acct. Code: \_\_\_\_\_\_\_\_\_\_ | Amount: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |