

**George Mason University**  
**Request and Authorization to Travel**

**Section 1: Traveler Information**

Date: \_\_\_/\_\_\_/\_\_\_

Name \_\_\_\_\_  
 Address (street) \_\_\_\_\_  
 Address (apt., etc.) \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip \_\_\_\_\_  
 Department \_\_\_\_\_

G#: \_\_\_\_\_  
 Employment Status: \_\_\_\_\_ GMU Employee  
                                   \_\_\_\_\_ Candidate  
                                   \_\_\_\_\_ Other  
 Mail Stop \_\_\_\_\_ Telephone \_\_\_\_\_

**Section 2: Trip Information**

Type of Trip: \_\_\_\_\_ State/Grant Business \_\_\_\_\_ Conference \_\_\_\_\_ Recruitment \_\_\_\_\_ Athletics  
                                   \_\_\_\_\_ Training/Education \_\_\_\_\_ Presentation \_\_\_\_\_ Field Work \_\_\_\_\_ Other

Purpose/reason of Trip: \_\_\_\_\_  
 \_\_\_\_\_

Benefit to GMU (Foreign Travel): \_\_\_\_\_  
 \_\_\_\_\_

Departure: Date: \_\_\_/\_\_\_/\_\_\_ Time: \_\_\_:\_\_\_      Return: Date: \_\_\_/\_\_\_/\_\_\_ Time \_\_\_:\_\_\_  
 Primary Destination: City \_\_\_\_\_ State/Country \_\_\_\_\_  
 Other Destination: City \_\_\_\_\_ State/Country \_\_\_\_\_  
 Six-digit Account(s): Primary \_\_\_\_\_ Amount \_\_\_\_\_  
                                   Secondary \_\_\_\_\_ Amount \_\_\_\_\_

**Section 3: Estimated Expenses:**

<u>Category</u>	<u>Amount</u>
Commercial Transportation _____ Air _____ Train _____ Other _____	_____
Rental Vehicle: Yes _____ No _____	_____
Vehicle Mileage: Distance _____ Rate _____ _____ Personal _____ State Vehicle _____	_____
Registration: Includes: _____ Meals _____ Lodging _____	_____
Lodging: Nights _____ Rate(w/tax) _____ Check here if conference or host facility _____	_____
Meals: No. Days _____ Rate _____	_____
Other (specify) _____	_____
<b>Total</b>	_____

**As the traveler, I certify that the above estimated expenses are reimbursable and that those for lodging and meals do not exceed the maximum amounts authorized by the Commonwealth of Virginia (or by the sponsor of the grant to be charged, as applicable).**

**Section 4: Signatures**

	<u>Dates</u>
Request for Approval (Traveler) _____	_____/_____/_____
Recommend Approval (Supervisor) _____	_____/_____/_____
Recommend Approval (Responsible Person, P.I., Grants Only) _____	_____/_____/_____
<b>Approved</b> (Approving Official) _____	_____/_____/_____