

# Travel Pre-Authorization Request

Traveler Information

total \_\_\_\_\_

\*Traveler's Name \_\_\_\_\_ Preparer's Name (if not Traveler) \_\_\_\_\_

\*Traveler's Email \_\_\_\_\_ \*Is Traveler a US Citizen  yes  no

\*Affiliation \_\_\_\_\_ description if Other \_\_\_\_\_ \*Is Traveler an Employee  yes  no

\*Affiliated Department/School/Center \_\_\_\_\_

\*Departure Date \_\_\_\_\_ \*Return Date \_\_\_\_\_

\*Destination (city, state, country) \_\_\_\_\_

\*Travel Request Type \_\_\_\_\_

[International Travel](#)  
See link for additional information.  
Attach both the  
Travel Authorization Petition (step 2)  
and Travel Registration (step 3).

Trip Information

Conference  Workshop  Meeting  Other \_\_\_\_\_

\*Event Name/Description (no abbreviations) \_\_\_\_\_

Event Website \_\_\_\_\_

Event Start Date \_\_\_\_\_ Event End Date \_\_\_\_\_

\*Purpose of Travel (check all that apply)

Present Paper  Collaboration  Professional Development  Recruit Students

Recruit Faculty  Present Poster  Training  Technical Session  Fieldwork

Required by Agency \_\_\_\_\_  Other \_\_\_\_\_

\*Benefit to UCF \_\_\_\_\_

Missed Obligations (class, office hours, meetings, etc.)  
Explain how each instance will be covered.

Special Considerations

Check all that apply and review linked resources for more information. *Please complete and attach required forms. The Business Center will route forms for Dean and Provost approval.*

- [Over 30 Days](#)  [Travel Advance Requested](#)  [Field Advance Requested](#) + [Power of Attorney](#)
- [Group Travel Roster](#)  [Export Control](#)  [Restricted Destination](#)
- [Overnight stay within 50 miles of headquarters](#)  [Fly America Act \(travel on Federal grants\)](#)

\*Funding Source(s)

Include Worktags if possible. If unsure, please describe the funds. Explain any charge splitting or funding caps.

- Grant funds  Grant and non-Grant funds  no Grant funds

If using fund types listed below, attach the award information. (check all that apply)

- [University Travel Awards](#)  [COS Research Travel Grant](#)
- I expect to be reimbursed by an outside organization and have reduced the amount from UCF.
- I expect an outside organization to pay for a portion or all cost and will arrange for UCF to be reimbursed.
- Student Government Award  College of Graduate Studies (added directly to student account)

\*Requested Travel Funds

**Total Funds Requested** \_\_\_\_\_

Registration		Per Diem (\$80/day)	
Airfare		Domestic Meal Allowance (\$36/day)	
Parking		Foreign Meal Allowance	
Mileage (\$0.445 per mile)		Car Rental	
Tolls		Fuel (for rental car only)	
Taxi/Rideshare		Internet/Business Calls	
Conference Hotel		Passport/Visa/Conversion Fees	
Non-Conference Hotel		Presentation Materials	

\*Signatures

Traveler's  Preparer's

	Signature	Date
UCF Faculty or Staff Member approver	Signature	Date

*This may be the traveler's supervisor, research advisor, grant PI, search committee chair, etc.*

Chair or Director	Signature	Date
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Please add complete worktags below

\_\_\_\_\_ Budget Analyst review

\_\_\_\_\_ Post Award review

**Travel Pre-Authorization Request Form Directions**

Completed forms should be emailed to [cos.financebusiness@ucf.edu](mailto:cos.financebusiness@ucf.edu) for processing.

**Note:** Faculty and staff entering Spend Authorizations (SA) into Workday are not required by the Business Center to use this form unless required by their Chair or Director. The SA takes the place of this form. Travel policy and budget review will take place in Workday if the form is not used.

Students submitting their own SA should use this form and upload on the Attachments tab in Workday.

Items marked with \* are required fields.

- All items in Traveler Information are required. The total in upper right will auto-calculate.

**Note:** Travel over 30 days requires Provost approval. Review the resource under Special Considerations.

- International travel requires approval by UCF Global even if it is complimentary.

**Note:** The approved Travel Authorization Petition (TAP) and Travel Safety Registration are required before a SA can be submitted. Refer to linked resource for details.

- Describe the reason for your travel.

**Note:** If you are not attending an event with a program either include a detailed itinerary or complete the [Meeting Information Form](#).

- Benefit to UCF is required for all travel and must be included in the SA.

- Detail any missed obligations and how they will be covered.

- Review all Special Considerations. If applicable to your trip view linked resources and include any required forms.

**Note:** Do not route forms to COS Dean or Provost. The Business Center will route for additional signatures.

- Funding source is required if travel is not complimentary.

- Review additional fund types and attach award information if applicable.
- CGS funds should not be included in the Requested Travel Funds.

**Note:** Federal grants require that airfare comply with the Fly America Act. Review the resource linked under Special Considerations.

- Please include only funds requested from UCF in this section. This should be your best estimate. See below for more information on specific items. If you have questions, please reach out to your Travel and Procurement Coordinator.

- Mileage: Enter the number of miles. The form will calculate the dollar amount.
- Taxi/rideshare: UCF allows up to a 20% tip.
- Conference hotel: Used when booking in a block of rooms reserved by the event.
- Non-conference hotel: Used for any other lodging type. Please note there is a cap of \$225 per night. Exceptions can be made if no hotels are available at that rate and comparable rates are documented at the time of booking. Please reach out to your Travel and Procurement Coordinator for guidance.
- Per Diem: Used for lodging and meals combined. This may not be claimed if you are also requesting hotel or meal allowance.
- Domestic Meal Allowance: Calculated based on your departure and arrival times (\$6 breakfast, \$11 lunch, \$19 dinner). Please estimate based on the number of days. No receipts are required.
- Foreign meal allowance: Calculated based on the [US Department of State rates](#). No receipts are required.
- Car Rental: UCF has contracted rates, please ensure you [book through Concur or one of UCF 's contracts](#).

- Please sign as the traveler or preparer and route for approval signature(s). See **Note** at the top of these instructions.

- If a Chair or Director is traveling, please send to [cos.financebusiness@ucf.edu](mailto:cos.financebusiness@ucf.edu) for routing to the Dean.
- A student should ask their PI or supervisor to sign the form.
- If your area requires Chair or Director approval outside Workday, please route the form to them for approval.

- Once the form is received by the COS Finance Budget Business Center it will be routed for budget review if needed. Please leave this area blank.

[Reset Form](#)

UCF | College of Sciences | Travel Pre-Authorization Request | total \$ 0.00

- 1 Traveler Information**

\*Traveler's Name \_\_\_\_\_ Preparer's Name (if not Traveler) \_\_\_\_\_

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\*Affiliation -- Select One -- description if Other \_\_\_\_\_ \*Is Traveler an Employee  yes  no

\*Affiliated Department/School/Center -- Select One --

\*Departure Date \_\_\_\_\_ \*Return Date \_\_\_\_\_

\*Destination (city, state, country) \_\_\_\_\_

\*Travel Request Type -- Select One --
- 2 International Travel**  
See link for additional information. Attach both the Travel Authorization Petition (step 2) and Travel Registration (step 3).
- 3 Trip Information**

Conference  Workshop  Meeting  Other \_\_\_\_\_

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Required by Agency \_\_\_\_\_  Other \_\_\_\_\_
- 4 \*Benefit to UCF**

\_\_\_\_\_
- 5 Missed Obligations (class, office hours, meetings, etc.)**  
Explain how each instance will be covered.

\_\_\_\_\_
- 6 Special Considerations**  
Check all that apply and review linked resources for more information. Please complete and attach required forms. The Business Center will route forms for Dean and Provost approval.

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Group Travel Roster  Export Control  Restricted Destination

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Conference Hotel		Passport/Visa/Conversion Fees	
Non-Conference Hotel		Presentation Materials	
- 9 \*Signatures**

Traveler's  Preparer's \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

UCF Faculty or Staff Member approver \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
*This may be the traveler's supervisor, research advisor, grant PI, search committee chair, etc.*

Chair or Director \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_
- 10** Please add complete worktags below

\_\_\_\_\_ Budget Analyst review

\_\_\_\_\_ Post Award review