TRAVEL AUTHORIZATION ESTIMATE AND CHECKLIST REIMBURSEMENT FORM

Student Travel: All students traveling falls under the purview of Student Affairs & Enrollment Management, which requires a notification to travel be submitted for all travel. http://www.fau.edu/studenttravel/ (once approved must turn in with this form the Approval letter and code of conduct form and travel be fully approved in workday before purchases.

- *Complete this form with estimated expenses approximately 1 week before travel, attaching any expenses paid prior to travel AND complete the actual expenses upon return from your trip, with all receipts.
- * All receipts will *ultimately be* scanned into Workday. When scanning, please scan copies of individual receipts labeling each receipt with your name and expense type (airfare, hotel, taxi, etc.).

For Reimbursements update form and completed no later than 60 days following your return.

CONTACT INFORMATION AND TAG#			
Date:		Source(s) of Funding:	
Name:		Z#	
TRAVEL INFORMATION			
Destination:			
Purpose of Travel:			
Justification/Benefit to State:			
Departure:	Location:	Date:	Time:
Return:	Location:	Date:	Time:
Will you miss any classes? Yes No	Date, Course # and Coverage	e: N/A	

EXPENSE TYPE	Travel Expense Estimate	Method of Payment (P-card or out of pocket)	REIMBURSEMENT Upon Return- fill out below and attach appropriate invoices
Registration & Membership: Submit the conference agenda, if attending conferences/workshops; letter of invitation (if you don't have an a agenda a RA form is required to be submitted)	\$	Paid with P-Card? Yes No OR Out of Pocketyesno	Reimbursement Amount\$ Invoice attached?
Airfare: (economy class tickets only) Airline tickets must include itinerary and the invoice showing payment	\$	Paid with P-Card? Yes No OR Out of Pocketyesno	Reimbursement Amount\$ Invoice attached?
Baggage: must have invoice showing payment (Excess baggage charges are reimbursable only for materials used for University business. A supporting receipt is required)	\$	Paid with P-Card? Yes No OR Out of Pocketyesno	Reimbursement Amount\$ Invoice attached?
Airport and other Parking: must have receipt and must include date/time and payment method	\$	Paid with P-Card? YesNo OR Out of Pocketyesno	Reimbursement Amount\$ Invoice attached?

Hotel: Hotel receipts must include itemized expenses, and show payment method (if paid on pcard in state of Florida no tax is allowed) * Lodging will be reimbursed at the single occupancy rate unless a room is shared by multiple University travelers resulting in a cost savings to the University. If the hotel receipt indicates double occupancy and the room is not shared with other University traveler(s), the reimbursement must be reduced or confirmation that the rate is the same for single and double occupancy is required	\$ Paid with P-Card? Yes No OR Out of Pocket yes no No room service allowed on pcard- will have to reimburse FAU	Reimbursement Amount\$ invoice attached? Room service will be deducted from reimbursement
Car Rental: (compact only) Car rental is reimbursed at the state rate through National/Enterprise's compact rate, unless justification is given; please book through FAU's online portal for Enterprise to ensure FAU's rate http://www.fau.edu/controller/travel/car_rental.php	\$ Paid with P-Card? Yes No	Reimbursement Amount\$ Invoice attached?
Car Rental Gas: Gas should be paid before turning in rental and receipts submitted separately.	\$ Estimate of gas	Reimbursement Amount\$ Invoice attached?
Personal Automobile Mileage: mileage is based on \$0.445/mile- Attach a map(google map or campus to campus map found in workday) (must use most direct point of direction)	\$ Estimate of Mileage	Reimbursement Amount\$ Map Attached
Cabs/Shuttes: (uber-taxi-ect) Tips not to exceed %15 of Taxi fare	\$ Paid with P-Card? Yes No Or Out of Pocketyesno	Reimbursement Amount\$ Invoice attached
Meals are Per-Diem: # of Days	\$ Food	Update departure and return dates and times if different
Meals are reimbursed at \$6 for Breakfast, \$11 for Lunch and \$19 for Dinner Departure Date/time Return Date/Time	ls	from original travelbreakfast (\$6.00) Before 6am and extend past
(no receipts required, but are not reimbursed if a particular meal is included on the agenda by the workshop/conference and you opted not to attend	not allowed	Bam Lunch (\$11.00) before 12pm and extend past 2pm
meal function-this not an acceptable explanation to reimburse meal allowance if meal was included); **Meals for first and last days of travel are based on times of	on n card	Dinner (\$19)
departure and return (meals are per person –per diem and will not be reimbursed if you choose to pay for others)	p-card	Before 6pm and extend past 8pm
Misc: (describe)	\$ \$	\$ Reimbursement Amount\$ Invoice attached

EXPENSES NOT ALLOWED AND WILL NOT BE REIMBURSED. (FOR ITEMS NOT ON LIST, PLEASE ASK TO MAKE SURE IT CAN BE REIBMURSED)

Expenses Not Allowed. The following list, which is not all-inclusive, represents some travel expenses that are not reimbursable:

- * Personal travel insurance (life or medical insurance)
- * Rental car insurance option for personal accident waiver.
- * Personal telephone calls should not be charged to university telephone numbers or credit cards, nor should they be listed as items for reimbursement on a travel voucher.
- * Tours, side trips, etc. which do not benefit the State.
- * Traffic fines or parking violations.
- * Mileage between home and official place of work.
- * Meals in excess of per diem.
- * Flight Insurance
- * GPS
- * Room service (will be deducted from reimbursement if on hotel invoice)
- * Alcoholic beverage's
- * no meal reimbursement for one day travel not involving an overnight stay

SPEND_AUTHORIZATION		Completed on:
	signature	
EXPENSE_REIMB		Completed on:
	signature	



Research Accounting Travel Information Sheet

Please complete this form for grant accounts if you are unable to obtain an agenda.

Traveler Information (Required)				
Name of Traveler:			<u>-</u>	
Traveler Phone Number:			Traveler Email:	
		TAG Informati	on (Required)	
Will the travel cost be allocat			Yes	No
If yes, please provide all TAG n	umber related	d to this trip:	if the trip cost has	been allocated to multiple TAG numbers:
Trease explain the unocurion	metrou uscu	to charge each 17se	in the trip cost mis	been unocuted to matapie 17th nambers.
Please Refer to the Research Account	nting 10.5.7 Di	rect Cost Policy pages	5 & 6 regarding the all	location method justifcation. See link below.
	Confer	ence/ Meeting I	nformation (Rec	mired)
	Comer	chec, Meeting I	morniation (itee	quireu)
Type of trip (Conference, works Research Collaborations, etc):	shops,			
Meeting /Conference Title:				
Departing Location (City, State,	Country):			
Arriving Location (City, State, C				
Start Date and Time:				
End Date and Time:				
Traveling companion name if A	applicable:			
	Whati	is the purpose o	f the trip? (Dear	uirod)
How	v does this	trip benefit the	research proje	ct? (Required)
			,	
For any Additional Information:				
For Example, if traveling to multiple		·		rovide exact dates of travel related to business
purpose or if traveling to multiple l	locations for bu	usiness (grant) purpose	e, please provide all lo	cations and timeframes.
Form Completed by:				Date of Completion:
NOTE:				

10.5.7- Direct Cost Policy