Timer \*\* Hide

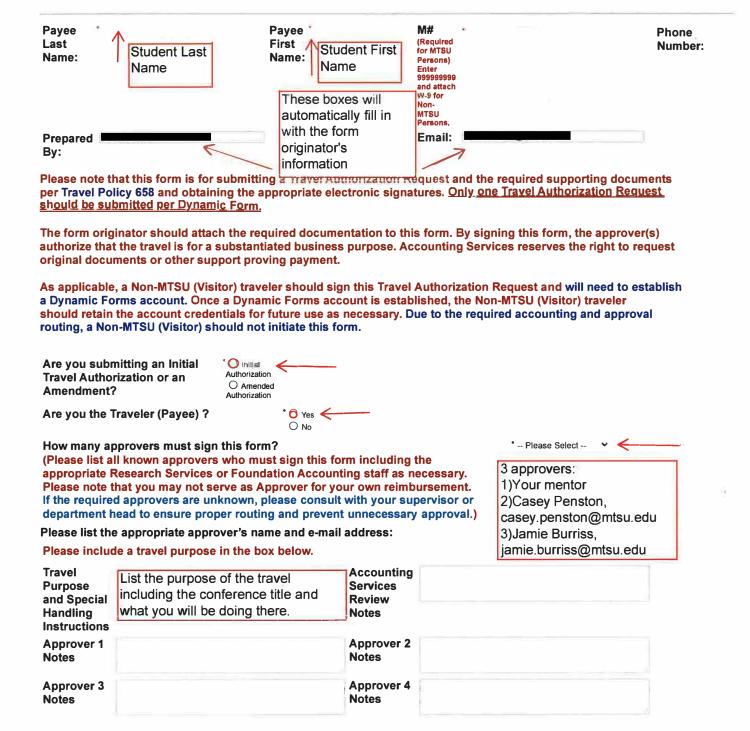
45 minutes

\* = required field

Some content may be updated based on selection

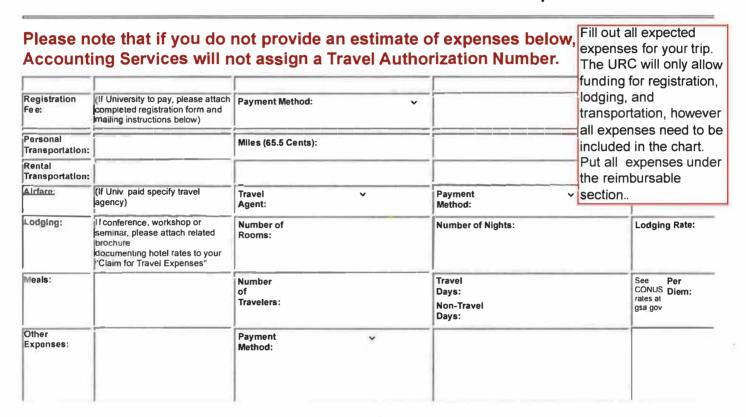


# **Travel Authorization Request Middle Tennessee State University**



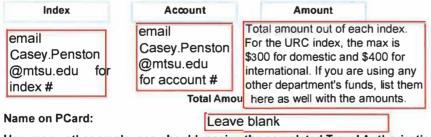
| 5/20, 5.567 NV                                                                                                                                                                                                                  | naver ratherization request   Dynamic remo                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| Approver 5<br>Notes                                                                                                                                                                                                             | Accounting Services Entry Notes                                                                                 |
| Additional<br>Approver 1<br>Notes                                                                                                                                                                                               | Additional Approver 2 Notes                                                                                     |
| Please attach supporting documentation and documents should be merged into ONE PDF file. If you do not University, the following is a link to a free service to merge PDFs: https://www.adobe.com/acrobat/online/merge-pdf.html |                                                                                                                 |
| Department: Your home dept. Travel Typ                                                                                                                                                                                          | e: Please Select V Travel Reason: Attach all cost estimates to the Supporting Documentation section as ONE PDF. |
| Destination:                                                                                                                                                                                                                    | Example: mileage maps,                                                                                          |
| Departure                                                                                                                                                                                                                       | ä airfare, lodging and registration cost screenshots                                                            |
|                                                                                                                                                                                                                                 | Estimation of Evanges                                                                                           |

### **Estimation of Expenses**



#### AMOUNT APPROVED (IF LESS THAN TOTAL ESTIMATE OF TRAVEL EXPENSES):

TOTAL ESTIMATED TO



How many other employees should receive the completed Travel Authorization?

(Once the form has been signed by all approvers, the system sends an e-mail to the form originator who can access the TA and send to others as necessary. This section only serves as a reference for the form originator to know who to send the TA once the form has been authorized by all approvers. If the originator is not the Traveler (Payee), the originator should send the form to the Traveler (Payee). Because the

2 People: Casey.Penston@mtsu.edu and the person traveling system sends a notification message to the originator, Accounting Services no longer emails the completed TA.)

S. Attach

## Advance Request (International/Group Travel Only)

Employee Payee: By signature on this form, I hereby authorize the amount of this advance to be deducted from my next salary payment if a Claim for Travel Expense has not been submitted within 30 days of return or by June 30th.

Student Payee: By signature on this form, I hereby authorize MTSU to encumber my records for any temporary travel advances whereby not allowing me

<u>Student Payee</u>: By signature on this form, I hereby authorize MTSU to encumber my records for any temporary travel advances whereby not allowing m access to my grades or to register for upcoming semester classes if I fall to submit a travel claim for the trip or refund the University for the advance received.

Advance Requested: Leave blank Needed: Leave blank

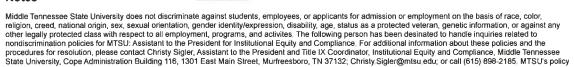
Accounting Services Review

Are additional approvers required to complete this form?

Is the M# Correct? Yes No

# Accounting Services Adjustment Notes

of nondiscrimination can be found at http://www.mtsu.edu/titleix/



Save Progress Next