

**AUTHORITY TO TRAVEL FORM-ROUGH COPY
DEPARTMENT OF ROMANCE LANGUAGES**

Name: _____ Social Security#: _____

Time and date of departure: _____ Mode of travel: _____

Dates and address(es) while absent: _____

Nature of official business: (Give title and full name of the group before which you are reading if you are presenting a paper.) _____

Explain how you will handle each class that you will miss and how your other University duties will be taken care of. (It is preferable that you give a particular person who is responsible.)

Do you want air travel expense charged directly to the University? _____

If so, give the name of the travel agent: _____

Are you receiving any support from the V-P for Research for your trip? _____ If so, give the amount:
\$ _____

Itemized estimate of costs:

Meals	\$ _____
Lodging	\$ _____
Transportation	\$ _____
Other (explain)	\$ _____
TOTAL	\$ _____