



# **REQUEST FOR TRAVEL APPROVAL or PREPAID REGISTRATION or CASH ADVANCE**

<b>PU</b>	<b>NF</b>
Vendor # _____	
Voucher # _____	
Invoice # _____	

<b>Name:</b>	Gerardo Dominguez	<b>Employee No.</b>	
<b>Address:</b>	15853 Paseo Del Sur	<b>City</b>	San Diego
<b>State</b>	CA	<b>ZIP</b>	92127
<b>Dept. Contact:</b>	Amy Armstrong	<b>EXT.</b>	X 4273
<b>Destination</b>	Cape Canaveral, FL	<b>Date/s of Trip</b>	From 9/6/2016 To 9/11/2016
<b>Purpose of Trip:</b>	Attend mission launch for OSIRIS-REX as part of professional development related to faculty research		

## **ESTIMATED EXPENSES FOR REIMBURSEMENT BY CSUSM**

<b>*** Meal Est.</b>	250.00	<b>PLEASE PAY REGISTRATION TO:</b>
<b>Lodging or Hospitality Gift</b>	425.00	
<b>Air Fare</b>	350.00	
<b>**International Travel Ins</b>		
<b>*Auto Rental</b>		<b>Supplier Email/Contact (required):</b>
<b>*Mileage (.54 cents per mi.)</b>		
<b>***Miscellaneous</b>	50.00	
<b>***Shuttle/Taxi</b>	100.00	
<b>***Registration</b>		
<b>Parking</b>		Attn:
<b>TOTAL ESTIMATE</b>	\$0.00	Address 1:
<b>Less Direct/Prepaid Expense</b>		Address 2:
<b>Total Employee Expense</b>	\$0.00	City:
<b>Advance Due @ 90% Employee Expense</b>		State/Zip:
<b>Date Advance Needed</b>		

**\*Current Defensive Driving cert required for reimbursement. Expiration Date \_\_\_\_\_**

**\*\*\* Advances that can be issued for domestic travel include meals, miscellaneous, shuttle/taxi, and registration greater than \$100.00.**

I hereby certify that I am currently a California State University Employee (Requirement if receiving reimbursement from the State) and that a.) If I am using a privately owned vehicle, I have a current "Authorization to use Privately Owned Vehicle" (form STD 261) on file with the University and I have the minimum liability insurance as required by State law and b.) I have satisfied the State Defensive Driver Training requirements. I have made arrangements for the classes meeting during my absence and/or for administrative and other duties.

<b>Signature of Traveler:</b>		<b>Date:</b>	
<b>Title of Traveler:</b>		<b>EXT:</b>	
<b>Funding Source:</b>	<b>Account</b>	<b>Fund</b>	<b>Dept</b>
		<b>Program</b>	<b>Class</b>
		<b>Project</b>	<b>Amount</b>
<b>Funding Approving Authority</b>			

*Please refer to "Approval for Travel" Memorandum dated 12/31/08 [www.csusm.edu/travel/EO688travelapproval120108.pdf](http://www.csusm.edu/travel/EO688travelapproval120108.pdf)*

## **Approving Authority**

<b>Title</b>		<b>Date:</b>	
<b>Final Approving Authority (In-State and Out-of-State Travel)</b>			
<b>VP/Provost ONLY</b>		<b>Date:</b>	
<b>Final Approving Authority (Out-Of-Country Travel)</b>			
<b>President ONLY</b>		<b>Date:</b>	

## ACCOUNTS PAYABLE

### REQUEST FOR TRAVEL APPROVAL INSTRUCTIONS

1. Please provide the travel desk with the ORIGINAL Green form and “wet” signature **for any advance and any registration request**. Keep a copy in your department.
2. **Name-** First, middle initial and last name of CSUSM employee traveling on University related business.
3. **Employee No-** Number assigned by Human Resources & Equal Opportunity.
4. **Address-** Mailing address where reimbursement will be sent. Required even if check is being picked up or on direct deposit.
5. **Dept. Contact-** Name of person to contact for travel related questions/information.
  - a. **Ext-** Telephone extension to contact for travel related questions/information.
6. **Destination-** City and State where employee will be traveling to on University related business.
  - a. **Date/s of Trip-** In the FROM cell, date when employee is departing for travel. In the TO cell, date when employee is expected to arrive home from travel. *If travel is for one (1) day, type/write in the date of travel on both the FROM and TO cells.*
7. **Purpose of Trip-** Reason for traveling and/or title of training or conference attending.
8. **Estimated Expenses for reimbursement by CSUSM-** Approximate dollar amounts employee will incur during their travel time.
  - a. **Advance due @ 90% employee expense-** Advances including prepaid registration granted if:
    - i. Traveler is not a US Bank Corporate Visa cardholder due to extenuating circumstances.
    - ii. Conference does not accept Visa and registration is greater than \$100.00
    - iii. Employee is traveling out of the country.
    - iv. Students
  - b. **Authorization Code-** Travel authorization codes are used to direct bill the University if the traveler does not have an American Express card, the conference does not accept the American Express card or you are making arrangements for an interview candidate. The only items that are eligible for direct bill are conference registration, airfare (except for candidate travel) and hotel accommodations. To request a travel authorization number, please email the travel desk at [traveldesk@csusm.edu](mailto:traveldesk@csusm.edu) and include the following information
    - i. Traveler's Name
    - ii. Date of Trip
    - iii. PeopleSoft Chartfield String
    - iv. Amount the authorization is not to exceed
    - v. Type of Expense the TA# will be used for (direct billed) (airfare, lodging, rental car)
    - vi. Will there be other expenses that will be paid on a 262
    - vii. Reason for trip
    - viii. Person's name to approve this expense. (Person will be contacted via email for approval)
  - c. **Registration Information-** If you are attending a conference and want a check sent to the vendor for registration, please list the conference name and address in this section. Please also include a valid email address for the suppliers accounting department. This information is required in order to retrieve a 204 (tax) form. Failure to provide requested information may result in a delay of payment to the supplier.
9. **Signature of Traveler-** Signature of employee traveling on University related business. Employee to include date s/he signed the request.
10. **Funding Source-** PeopleSoft Chartfield String noting where the expense will be charged.
11. **Amount-** Amount to pay from the PeopleSoft Chartfield String provided in #9.
12. **Approving Authority-** Signature of manager with fiscal authority for the department being expensed.
13. **Final Approving Authority (In-State and Out-of-State Travel) -** Refer to President's "Approval of Travel" memorandum dated 12/1/2008 for individuals who can approve In-State and Out-of-State Travel requests.
14. **Final Approving Authority for (Out-of-Country Travel) – President Only.** If travelling to a “high hazard” country the request must go the Chancellors office for approval.
15. **International insurance for Out of Country travel is REQUIRED.** Please see the following link for information. [http://www.csusm.edu/rms/rm/foreign\\_travel\\_insurance.html](http://www.csusm.edu/rms/rm/foreign_travel_insurance.html)

Once the Travel Request Approval Request Form is completed; **Original** stays in the department file.

**NOTE:** If an advance or a Registration is being requested please make a photocopy for your department files and forward the ORIGINAL to the Travel Desk.