MUST BE TURNED IN 14 DAYS PRIOR TO DEPARTURE

SA #_____
(Internal Use Only)

Spend Authorization

Traveler Name:_____ ☐**Faculty** ☐**Student** ☐**First Time to Travel for UA**

Event Dates:_____**To**_____**Travel Dates:**_____**To**_____

If travel dates are extended more than one day before and/or after event dates please provide justification:

_____

_____

Destination City/State:_____

Purpose:_____

_____

If attending a conference please list the conference name in full. If presenting at a conference please note that in the purpose and mark Official Business.

☐ **Official Business** ☐ **Education & Training Seminars** ☐ **Conferences and Conventions**

How are you traveling?	Estimated Costs	Admin TCard Used
Commercial Air (Itinerary required)	$ 0.00	
Private Vehicle Miles 70 x $0.52	$ 36.40	
Rented Vehicle (Enterprise)	$ 0.00	
Taxi	$ 0.00	
Other (bus, train, subway, etc.)	$ 0.00	
Parking	$ 0.00	
Registration	$ 0.00	
Hotel: Cost per day $ 0.00 x #of days 0	$ 0.00	

☐ **Conference Hotel** ☐ **Safety**

☐ **Save Costs** ☐ **Required**

☐ **Other:**_____

Estimated Total	$ 36.40
Total does not include meals	

Do you want a travel advance?

If YES please complete cash advance agreement form found at https://travel.uark.edu/_resources/documents/CashAdvanceAgreementforTravelers.pdf

Is this foreign travel?

If YES please register trip at: http://travel.uark.edu/_resources/documents/International_Travel.pdf

You must provide confirmation that foreign travel has been registered when turning in the Travel Authorization.

Worktag to be charged:_____

Authorized Signature:_____

Revised 12/2/2022