THE CITY UNIVERSITY OF NEW YORK
College of Staten Island

Travel Authorization Request

Department Name:

Dept Code		Oper Unit	9999	Fund	10	Program	99999	MP		SP Init	9999	FND SRC	

Payroll title

Name **Email Address** **Phone**

Home Address **City** **State** **Zip**

Destination **Departure date** (Mo. Day) **Return date** (Mo. Day Yr.)

Purpose of trip

Sponsoring Organization (Include copy of notification or copy of page from the preliminary program showing details: name, place, venue and dates of the conference etc.)

To ensure timely reimbursements of travel expenses, the traveler should be familiar with the State of New York travel requirements. To assist travelers, we have summarized the guidelines developed by the Office of the State Comptroller, Travel Audit Division.

Before initiating a trip, the traveler should:

- Obtain necessary prior approvals for travel plans including determining the most efficient itinerary and method of travel
- Obtain all necessary travel related documents (i.e. Tax exemption forms for NYS lodging, Travel Voucher forms).
- Maintain an accurate record of travel expenses including departure and arrival times and actual automobile mileage
- Obtain and maintain all necessary original receipts to support travel expenses.
- Claim reimbursement for only actual allowable expenses within the maximum allowable reimbursement rates.
- Complete Travel Voucher completely and accurately for submission to your supervisor in a timely manner.
- Travel Authorizations and Expense Reports should be written and signed in ink by the claimant and his/her supervisor.

In addition, please note:

- Only telephone charges for official business may be reimbursed. Claims for reimbursement for telephone calls must be fully documented
- Personal expenses such as laundry, valet service, theatre and banquet tickets, entertainment and transportation to and from **are not reimbursable. In addition, lunch is not a reimbursable meal for overnight travel.**
- Claims for the reimbursement made for the purchase of necessary supplies, materials or similar expenses must be justified and supported by receipts

I have read and consent to the terms above:

Signature of traveler **Date**

DESCRIPTION	TRAVEL EXPENSES ESTIMATED
TOTAL	

Rental car requires justification and cost effective calculations

APPROVALS - PER BUDGETED DEPARTMENT NOTED ABOVE (choose A or B below)

A. Reimbursement to traveler is not to exceed OGS per diem rates

Authorized Signature **Date**

Print name

B. Reimburse traveler at conference rate if it exceeds OGS per diem rates

Authorized Signature **Date**

Print Name **Date**