REQUEST FOR TRAVEL APPROVAL / ADVANCE

Trip #	
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Travel on University Funds Outside Santa Barbara Area

NAME	OF TRAVELER:	
EMPLO	DYEE ID #:	
DEPAF	RTMENT:	
1. FU USED:	NDS TO BE	
2. DE	STINATION:	
	IRATION:ttes of Trip)	
	USTIFICATION:	
 5. ES	TIMATED COST:	
Airfa	are - ———	
Othe	er Transportation - ————	
Per	r Diem	
Oth	ner - <u></u>	
Tota	al <u>*</u>	
REQUI	ESTED BY:	(Date)
APPRO	OVED BY: Authorized for Payment by	(Date)
	Authorized for Fayment by	(Date)
	Department Chair	(Buto)
	Dean	(Date)
	Vice Chancellor	(Date)
EMPLO	DYEE DEVELOPMENT (Worshops, courses, seminars) (Staff	Personnel Only)
	Personnel Manager	
NOTE:	•	dvance, Travel Voucher, or
	When submitting to Dean's office, please type in triplicate.	
	This form not for use for recruitment purposes; please use "I for Recruitment Purposes"	Request for Travel Approval

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