## **REQUEST FOR AUTHORITY TO TRAVEL DOCUMENT**

**Important:** All Requests to Travel requires departmental signature approvals. Please submit request in a timely manner to avoid approval delays.

Submit Documents: In/Out of State Travel: 6 weeks in Advance Foreign Travel: 14 weeks in Advance (no exceptions)

**Advanced Payments(no exceptions):** You will need to request reimbursement if Advanced Payment is required by event advance payments for registration and airfare associated with travel will no longer be processed until travel has been approved.

Per Diem Website: www.gsa.gov/perdiem

## AP Dept. will notify you via email when travel has been approved. Susan V. Thomas/Accounts Specialist

Susan Y. Thomas/Accounts Specialist		
Name of Individual Traveling:		T-Number:
Position/Title:		_
Date of Departure:/ Date of Return	:/	
Place(s) to be Visited:		_
Name of Event:		_
Briefly State Your Participation:		
Please Circle Mode of Travel: AIR	DRIVING CA	\R RENTAL
AIR: (Almeda Travel – 713.592.8000)Ad	anced Pay orRei	mbursement
DRIVING: (MapQuest Only)		
CAR RENTAL: No Advanced Payment. Please Attac	n Rental Agreement	
AUTHORITY PLEASE ATTACH ALL REQUIRED DOC	TO TRAVEL CHECKLIST JMENTS BEFORE SUBMITTI	NG FOR APPROVAL
1. STATE TRAVEL FORM (BEFORE YOU TRAVEL)		
2. PROGRAM AGENDA		
3. TRAVEL ITINERARY (Almeda Travel)		
4. REGISTRATION FORM (Completed)		
5. CAR RENTAL AGREEMENT (If Renting a Car)		
6. MAPQUEST PRINTOUT (If Driving)		
REQUESTORS SIGNATURE	RECEIVED BY AP	PINITIALS DEPT/DATE