



INSTITUTE OF ARCTIC AND ALPINE RESEARCH

Travel Approval/Authorization

This form will be required for all domestic and international travel.

INSTAAR	CHARGE TO SPEEDTYPE(S):
TRAVELER'S NAME:	
TRAVELER'S EMPLOYEE ID:	BEGINNING TRAVEL DATE:
TOTAL ESTIMATED COST:	END TRAVEL DATE:
DESTINATION:	

TRAVEL JUSTIFICATION- FUND 30/31 MUST INCLUDE 1) Reason for trip 2) Benefit to Sponsored Project
3) Conference Name (no acronyms) , Conference Date, Name of paper presented (if applicable)

TRAVELER	DATE
_____	_____
*PI APPROVAL	DATE
_____	_____
FINANCE APPROVAL	DATE
_____	_____

Routing Instructions

- 1) Traveler signs and forwards form to Approver.
- 2) Approver signs and forwards to Accounting Technician.
- 3) Accounting Technician forwards to Office of Contracts and Grants, if needed.

NOTE: This form will be required for cost transfers involving sponsored projects.

*This may be skipped if the traveler is the PI