



BOISE STATE UNIVERSITY

Employee Travel Request at No Cost to Boise State

Instructions: All travel must be authorized for insurance purposes and according to policy. This form serves as the Travel Authorization for employees and faculty when 100% of travel costs will be paid by entities other than Boise State University. For student travel contact Travelservices@boisestate.edu. Complete the form, obtain signatures and keep on file in the employee's department. For insurance and liability issues, contact Office of Risk Management at RMI@boisestate.edu.

Section 1: Employee Information

Name:	Department:	Employee ID:

Section 2: Travel Information

Purpose of Travel: <i>(name of conference, sponsoring organization, etc.)</i>	
Details of personal involvement in activity: <i>(e.g. present paper, chair session, etc.)</i>	
University benefit from travel: <i>(e.g. national exposure for university, collaboration with peer institutions)</i>	
Source of funds: <i>(Who is paying for expense)</i>	
Destination:	
Departure date:	Return date:
Total working days absent:	
If travel plans conflict with your scheduled class(es) or assignments, indicate plans for coverage:	

Section 3: Signature Approval (print form, sign and keep on file in department)

I verify that this travel is appropriate university business. Coverage of classes and/or other assignments has been arranged, and the requested travel is approved.	
Employee Signature and Date:	
Immediate Supervisor Signature and Date:	
Dean or Department Head Signature and Date:	