

GLENVILLE STATE UNIVERSITY TRAVEL AUTHORIZATION FORM

Date of Request:		Travel Dates:	
Name of Traveler (Group):			
Name of Unit:		Unit P-Cardholder:	
Destination & Purpose of Travel:			
Type of Vehicle: <small>(State, Personal, Rental, Other)</small>			

Out-of-State Essential Travel Authorization
(Required for all out of state travel)

Approved By:	Dr. Mark A. Manchin President		Date
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Travel Details

Description	Vendor Name <small>(where applicable)</small>	Unit Price	QTY	Extended Price
Airfare				
Vehicle Rental				
Lodging				
Meals				
Gratuities				
Parking				
Tolls				
Gas/Fuel				
Shuttle Service				
Baggage Fees				
Registration Fees				
Charter Bus Service				
Mileage Reimbursement				
Other				
Other				
Other				
TOTAL				

Funding Information

Fund-Sub Fund	Unit	Object	Sub Object	Amount	Notes

Required Unit Signatures

Required Business & Finance Office Signatures

Approved By:		Date	Approved By:		Date
Unit Head if Less Than \$1,000.00 unless Area Vice President signs		Date	Director of Grants & Compliance if Grant Funded		Date
Approved By:		Date	Approve By:		Date
Area Vice President if \$1,000.00 or more		Date	Controller - Caren Jenkins		Date
Approved By:		Date	Approved By:		Date
President – Dr. Mark A. Manchin if \$5,000.00 or more		Date	Chief Financial Officer - Bert Jedamski		Date

The Controller and/or the Chief Financial Officer's signature signifies that the travel expenses listed herein may be arranged, purchased and/or paid for by the Unit P-Card Cardholder (preferred) or the Accounts Payable Office. Note: Travel Reimbursements must be processed by the GSU Travel Coordinator.