



Travel Authorization Form		
Request, Authorization and Agreement for Travel and Reimbursement		
Date of Request:	Employee (Last Name, First Name):	Assigned Division/Workcenter:
Chargeable Division/Workcenter: Client: Job Name:		Authorization Information / Charge Codes: 1. Contract Billable (ODC): 2. Contract Nonbillable (BU Allowable): 3. Unallowable: *Must have at least one filled in
Reason for Travel:		
Itinerary		Estimated Costs
Dates:	Air:	
	Hotel:	
Locations:	Rental Car:	
	Per Diem:	
	Mileage:	
	Processing Fee:	
	Other:	
	Total:	
Approval		
Supervisor/Program Manager/VP (Name/Date):		Chargeable Senior Vice President (Name/Date):
Signature:	Approved:	Disapproved:
<i>**For client sponsored travel, managers may submit client approval form in lieu of MicroTech Travel Authorization Form.</i> <i>***For overseas travel, the following applies:</i> <ol style="list-style-type: none"> 1. Complete the International Travel Form. 2. Contact FSO for specific debriefing requirements. 		Reason not approved:
		Signature:
MT Corporate Travel Office Use Only		
Signature:	Date Request Received:	Date Travel Booked:

