

Group Travel Authorization Request Form

Completed form must be submitted to the FMO before any contracts are signed/expenses incurred

General Information

Dept./Center Name: _____

Trip Coordinator's Name (permanent UW employee)*: _____

Dates of Travel: _____

Destination(s): _____

Purpose of trip: _____

Number of Student/Non-Employee Attendees: _____

Trip Leaders' Names (permanent UW employees): _____

**Students may assist in trip planning and coordination but the primary trip coordinator must be the point of contact with all vendors*

Trip Details

Is trip part of a for-credit course/required to graduate?

Yes No

Is a registration/trip fee being collected to cover part/all costs (circle one) for the trip?

Yes No

If yes, list amount to be collected from each participant: _____

Estimated group trip budget:

Group Airfare:	_____
Group Lodging:	_____
Ground Transportation:	_____
Group Meals:	_____
Gifts for Site Visits:	_____
Other Group Travel Expenses:	_____
Total:	_____

Check here to request a new 136 fund/project.

Check here if trip will be paid with more than one funding string (attach list of funding strings & splits)

Funding String(s):

_____	_____	_____	_____
Fund (3 digits)	UDDS/Dept ID (6 digits)	Program Code (1 digit)	Project Number (7 digits)

Comments/Additional Information:

By signing below, the requestor verifies that the purpose of this trip is in agreement with the mission of the Wisconsin School of Business and agrees to present themselves and the group in a professional manner for the duration of the group trip. The requestor also agrees to abide by all UW, System, and State of Wisconsin purchasing and travel rules and regulations, as it pertains to this trip. Finally, the requestor certifies that no meals, site visits, or other events occurring on the trip will be purely social in nature.

Requestor

Date

Approvals:

Dept/Chair Approval

Date

FMO Approval

Date