



**Talladega College  
Program  
TRAVEL AUTHORIZATION FORM**

\_\_\_\_\_  
Name of Requestor

Date \_\_\_\_\_ Department \_\_\_\_\_ Account No. \_\_\_\_\_

Source of Expenditure \_\_\_\_\_

I request to be absent for the period

\_\_\_\_\_ on \_\_\_\_\_ 20 \_\_\_\_\_ through \_\_\_\_\_ on \_\_\_\_\_ 20 \_\_\_\_\_ for \_\_\_\_\_  
Time Date Date Time Date Days

Purpose of Travel \_\_\_\_\_

I may be contacted \_\_\_\_\_  
Place of Lodging City State Phone

Work Coverage During Absence \_\_\_\_\_

Method of Travel \_\_\_\_\_ Airline Round Trip Fare \$ \_\_\_\_\_

Other Estimated Cost: If Auto \_\_\_\_\_ x \$ \_\_\_\_\_ /mile = \_\_\_\_\_  
Miles

Per Diem: \_\_\_\_\_ days @ \$ \_\_\_\_\_ /day = \_\_\_\_\_

Auto Rental \_\_\_\_\_

Other (Please itemize): \_\_\_\_\_

**TOTAL ESTIMATED TRAVEL** \$ \_\_\_\_\_

**I, the undersigned agree that Talladega College may deduct from my next month's payroll check for a Travel Advance in the amount of \$ \_\_\_\_\_ in the event that a Travel Expense Statement and supporting documentation is not turned in to the Business Office within seven days of my return to the campus.**

Date Check Needed \_\_\_\_\_ Requestor \_\_\_\_\_

Make Check Payable To \_\_\_\_\_

\_\_\_\_\_ Approved \_\_\_\_\_ Unable to approve (See Note)\*  
Immediate Supervisor

\_\_\_\_\_ Approved \_\_\_\_\_ Unable to approve (See Note)\*  
Division/Administrative Head

\_\_\_\_\_ Federal Program Clearance of Applicable

**I HEREBY CERTIFY THAT THE ABOVE REQUEST AND ACCOMPANYING COST ARE NOT ALLOWABLE ITEMS AND EXPENDITURES WITHIN GRANT REGULATIONS.**

\_\_\_\_\_ Approved \_\_\_\_\_ Unable to Approve (See Note)\*  
Federal Program Officer

\_\_\_\_\_ Approved \_\_\_\_\_ Unable to Approve (See Note)\*  
President

\_\_\_\_\_ Approved \_\_\_\_\_ Unable to Approve (See Note)\*  
Comptroller