

TRAVELER INFORMATION			
Traveler:	Faculty	Student	Other
			UFID#:
Email:	Cell phone #:	Home address (students):	
Depart Date/Time:	Return Date/Time:	Project to pay from:	
Destination(s) of Trip:			
Purpose of Trip/Benefit to State or Project:			

DOES THIS TRAVEL REQUIRE A DISCLOSURE OF OUTSIDE ACTIVITIES AND FINANCIAL INTEREST FORM?

Yes or No

<https://coi.ufl.edu/resource>

EXPENSES				
Business Expense Description	Amount and Type of Payment			Comments/Notes (indicate split / or shared charges)
	UF PCard	Personal Funds	Complimentary	
Registration				
Airfare				
Lodging				
Car Rental				
Fuel for Rental				
Mileage (0.445/Mile) Enter starting/ending address. Or include a map. (Personal car)				
Taxi/Shuttle/Train				
Baggage Fees				
Parking				
Tolls				
Meals				
Other				
Totals				

(Faculty) COURSES AFFECTED BY TRAVEL? (PLEASE CHECK ONE)	
Travel is not during assigned class time.	Travel is during class time. Classes affected are as follows:
EMA _____ EMA _____ EMA _____ EMA _____	How many class instruction contact hours will be missed? <input type="text"/>
ENU _____ ENU _____ ENU _____ ENU _____	Total class instruction contact hours missed during current semester: <input type="text"/>
The following provisions have been made for teaching the above mentioned classes in my absence:	

FOREIGN TRAVEL	
<input type="checkbox"/>	(Initial) I have consulted with my clinician or a travel clinic about my international travel and have received necessary vaccines and Travel medication.
<input type="checkbox"/>	(Initial) As required I have registered my international travel with the International Center https://internationalcenter.ufl.edu/travel/online-travel-registration and have received my Team Assist card. https://www.ufic.ufl.edu/travel/default.aspx?controlkey=Home
<input type="checkbox"/>	(Initial if applicable) If I am traveling to an embargoed country, I have additionally read the UF policy at https://internationalcenter.ufl.edu/travel/us-export-controls-embargoed-countries and as required I have contacted Dean Leonardo Villalón at villalon@afrika.ufl.edu or (352) 273-1536.
<input type="checkbox"/>	(Initial) I plan to take University-owned equipment to a foreign country and I have completed a Foreign Travel. Request at https://myassets.fa.ufl.edu/ext/#/home

I hereby certify that this is for official business of the University of Florida and will be performed for the purpose(s) stated.

SUPERVISOR/BUDGET AUTHORITY SIGNATURE REQUIRED FOR ANY TRAVELER OTHER THAN THE PI OF THE PROJECT

Traveler's Signature

Supervisor's Signature

Date

Email completed form to: finance@mse.ufl.edu

Finance Office Use Only:						
Dept. ID	Fund	Program	SOF	Flex	UFID	Project