Timer 🐶 Hide 45 minutes * = required field

Some content may be updated based on selection



Travel Authorization Request Middle Tennessee State University

Payee Last Name:	Student Last Name	Payee * First Student First Name These boxes will	M# (Required for MTSU Persons) Enter 99999999 and attach W-9 for Non-	Phone Number:			
per Travel Po	licy 658 and obtaining the	appropriate electronic sig		e required supporting documents ne Travel Authorization Request			
The form orig authorize tha original docu	t the travel is for a substar ments or other support pro	equired documentation to itiated business purpose. oving payment.	Accounting Ser	gning this form, the approver(s) vices reserves the right to request Request and will need to establish			
a Dynamic Forms account. Once a Dynamic Forms account is established, the Non-MTSU (Visitor) traveler should retain the account credentials for future use as necessary. Due to the required accounting and approval routing, a Non-MTSU (Visitor) should not initiate this form. Are you submitting an Initial							
Travel Autho Amendment	rization or an Authoriza Authoriza Authoriza	nded					
Are you the	Traveler (Payee) ?	Yes ONo					
How many approvers must sign this form? (Please list all known approvers who must sign this form including the appropriate Research Services or Foundation Accounting staff as necessary. Please note that you may not serve as Approver for your own reimbursement. If the required approvers are unknown, please consult with your supervisor or department head to ensure proper routing and prevent unnecessary approval.) Please list the appropriate approver's name and e-mail address: *-Please Select - * 3 - Your faculty mentor, Katie Medrano (Katie.Medrano@mtsu.edu) Jamie Burriss (Jamie.Burriss@mtsu.edu)							
	e appropriate approver's n de a travel purpose in the l			(Jamie.Burriss@mtsu.edu)			
Travel Purpose and Special Handling Instructions	List the purpose of the including the conference what you will be doing	travel Accounting Services Review	ng				
Approver 1 Notes		Approver Notes	2				
Approver 3 Notes		Approver Notes	4				

Approver 5 Notes		Accounting Services Entry Notes	ng		
Additional Approver 1 Notes		Additiona Approver Notes			
documents should University, the following				7-9 ♦ Attach File	
Department:	Your home dept. Tra	vel Type: Please Select	 Travel Reason: 	•	
Destination:					
Departure Date:	巤 Return Date:	曲		d	
			mate of expenses below	w, Fill out all expected expenses for your trip.	
Account	ing Services will n	iot assign a Traver.	Authorization Number.	The error will erry allen	
Registration Fee:	(If University to pay, please attach completed registration form and mailing instructions below)	Payment Method:	•	funding for registration, lodging, and transportation, however	
Personal Transportation:		Miles (65.5 Cents):		all expenses need to be included in the chart.	
Rental Transportation:				Put all expenses under the reimbursable	
Airfare:	(If Univ. paid specify travel agency)	Travel ~ Agent:	Payment Method:	Payment v section.	
Lodging:	If conference, workshop or seminar, please attach related brochure documenting hotel rates to your "Claim for Travel Expenses"	Number of Rooms:	Number of Nights:	Number of Nights: Lodging Rate:	
Meals:		Number of Travelers:	Travel Days: Non-Travel Days:	Days: CONUS Diem: rates at gsa.gov	
Other Expenses:		Payment V Method:			
Index email Katie.Med	email Katie.Medra	for \$400 for domestic and	ach index. e max is \$500 for	TOTAL ESTIMATED T	
@mtsu.ed index #	account #	international. If you are other department's fun Amoughere as well with the a	nds, list them		
Name on PC	ard:	eave blank		•	
(Once the fo form origina only serves the form has	rm has been signed by all tor who can access the TA as a reference for the form been authorized by all ap	approvers, the system sen A and send to others as neo n originator to know who to provers. If the originator is e form to the Traveler (Paye	nds an e-mail to the cessary. This section send the TA once and the Traveler	ie.Medrano@mtsu.edu the person traveling	

Travel Authorization Request | Dynamic Forms

6/28/23, 9:36 AM

system sends a notification message to the originator, Accounting Services no longer emails the completed TA.)

S. Attach

Advance Request (International/Group Travel Only)

Employee Payee: By signature on this form, I hereby authorize the amount of this advance to be deducted from my next salary payment if a Claim for Travel Expense has not been submitted within 30 days of return or by June 30th.

Student Payee: By signature on this form, I hereby authorize MTSU to encumber my records for any temporary travel advances whereby not allowing me

<u>Student Payee</u>: By signature on this form, I hereby authorize MTSU to encumber my records for any temporary travel advances whereby not allowing m access to my grades or to register for upcoming semester classes if I fall to submit a travel claim for the trip or refund the University for the advance received.

Advance Requested: Leave blank Needed: Leave blank

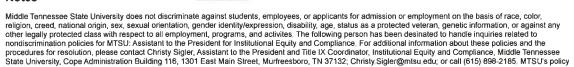
Accounting Services Review

Are additional approvers required to complete this form?

Is the M# Correct? Yes No

Accounting Services Adjustment Notes

of nondiscrimination can be found at http://www.mtsu.edu/titleix/



Save Progress Next