



Policy Supporting Document:	O-4.3.1
Policy Holder:	VP Administration & CFO

TRAVEL PRE-APPROVAL AUTHORIZATION

INDIVIDUAL TRAVELLING: _____

POSITION HELD: _____

PURPOSE/NATURE OF TRAVEL: _____

DESTINATION(S): Victoria to _____

TRAVEL DATES (inclusive of all dates away from college):

From: _____ to _____, _____

TRAVEL BUDGET:

Estimated Cost of Trip: \$ _____

How will this trip be funded? Please indicate below:

Internal Cost Centre External Funding If so, please specify source

Have all possible economies been explored/taken for this trip (i.e. economy airfare, shared accommodations, etc.) Yes No If not, please specify: _____

Phone contact while away: _____

NOTE: GROUP TRAVEL SHOULD BE CONSIDERED WHEREVER FEASIBLE.

APPROVAL PROCESS:

- 1 **Domestic travel requires approval of Dean/Director only.**
- 2 **International travel (including USA) requires Dean/Director approval FIRST, and then the VP or President.**

Employee Signature

Date

Dean/Director Signature

Date

Vice President/President Signature

Date

Completed authorization form to be returned to the Dean/Director's office; a copy of the authorization form is to be attached to the employee's travel claim.