

UNIVERSITY OF MARYLAND  
DEPARTMENT OF CIVIL & ENVIRONMENTAL ENGINEERING  
TRAVEL APPROVAL REQUEST  
(Please fill out form entirely)

TAR # \_\_\_\_\_

DATE: \_\_\_\_\_

**TRAVELER'S INFORMATION**

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

Is this traveler on UM Payroll?  YES  NO

SOCIAL SECURITY: \_\_\_\_\_

*If no Social Security #, specify Visa status information below.*

VISA TYPE: \_\_\_\_\_ VISA OR PASSPORT#: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE#: \_\_\_\_\_

**TRIP INFORMATION**

TRAVEL AGENCY (specify name): \_\_\_\_\_ AIRLINE: \_\_\_\_\_

Please make certain itinerary is in compliance with the "[Fly America](#)" U.S.A. flag career requirement\*

DEPARTURE DATE: \_\_\_\_\_ RETURN DATE: \_\_\_\_\_

ORIGIN: \_\_\_\_\_ AIRPORT: \_\_\_\_\_

DESTINATION: \_\_\_\_\_ AIRPORT: \_\_\_\_\_

**TRIP PURPOSE:** \_\_\_\_\_  
(please be specify)

**COSTS**

**KFS #:** \_\_\_\_\_

Fill in all appropriate costs fields below:

Air/Rail: \_\_\_\_\_  
Lodging/Housing: \_\_\_\_\_  
Travel Meals<sup>±</sup>: \_\_\_\_\_  
Phone/Internet: \_\_\_\_\_  
Ground Transportation: \_\_\_\_\_  
Personal Car Mileage: \_\_\_\_\_  
(.54\$ per mile)  
Conference Fee: \_\_\_\_\_  
Other travel expenses: \_\_\_\_\_  
**TOTAL:** \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>	Previous payments
	_____
	_____
	_____
	_____
	_____

<sup>±</sup> Domestic per diem rate: \$9 breakfast, \$11 lunch, \$25 dinner, [Foreign per diem](#)

**COMMENTS:** \_\_\_\_\_

\* Confirm that travel arrangements are in full compliance with the [University of Maryland Travel Policy](#) and individual Sponsored Agreement requirements.

\_\_\_\_\_  
TRAVELER SIGNATURE                      DATE                      PI'S SIGNATURE                      DATE