

**Request for Campus Absence**  
(To be completed prior to absence)

Name:	University ID #.:	
Destination(s):	Departure Date:	Return Date:
Purpose of Travel:		

**Financial Information**

Estimated TOTAL Costs: \$ _____	Cash Advance Requested? <input type="checkbox"/> Yes <input type="checkbox"/> No \$ _____ <small>(Available for graduate student travel, foreign travel or travel longer than 7 days)</small>	Need ATO? <input type="checkbox"/> Yes <input type="checkbox"/> No Estimated Airfare: \$ _____ Give ATO to: _____	University Auto? <input type="checkbox"/> Yes <input type="checkbox"/> No Departure time: _____ Return time: _____ License No.: _____ State of Issuance: _____ License Expire Date: _____
FOAPAL: _____	FOAPAL Title: _____		

**Educational Responsibility**

for Faculty and Instructors  
(To be completed even if travel is not funded through a University Account)

- I will not miss meeting any classes.
- I do not plan to meet the following classes:

Course & Section	Date & Time	Arrangements

**Signature**

I have made all necessary arrangements to meet my teaching and research obligations during my absence.

Requester's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Approvals and Other Information**

Project Director (if applicable):	Business Office (as appropriate):
Administrative Approval (if applicable):	
Emergency Contact Information (optional):	Cash Advance No.: