



CSU

Travel Authorization Forms

Process Flow



[CLICK HERE](#): Create a self-signed digital ID

[CLICK HERE](#): Sign a PDF using a digital ID

Instructions

For Pre-Authorization:

Fill out the following fields on the "Travel Authorization" form on Page 1 below.

The following information with the green boxes **must** be completed:

- Name
- CSU ID Number (must be an Employee or Student)
- Department
- Destination/City
- Purpose, or Conference Name
- Dates of Travel
- Per Diem Rates (using the link for reference)
- Estimated total expenses
- If applicable, check the box of either Grant Travel or International Travel, if so, additional approval & time is required

Save the "Travel Authorization" form (your general information will be automatically populated on the Travel Expense Report on Page 2)

3. If you are a graduate student, fill out the green boxes on Page 3 according to the instructions

4. Submit the completed form to your department's Administrative Coordinator who will share your form with the Department Chair, College Dean, and the Graduate Studies Office

During your Trip:

Save all physical receipts, take pictures & screenshots of all travel related expenses incurred

Upon Return:

1. Within two weeks, complete the "Travel Expense Report" on Page 2 below as needed for airfare, hotels, meals, and any other expenses related to the travel; the form will automatically calculate totals

2. Sign & Date Page 2 then save with your name in the file title

3. Please include file(s) showing all receipts when submitting your expense report to your Administrative Coordinator

Reminders:

- After receiving notice of approval for pre-authorization you may apply for additional funds through the Office of Research, Student Life/Student Government, or Faculty Research/PI
- CSU has limited funding available and does not guarantee funding for every student, nor any particular amount
- Your total expenses may not be fully funded

Travel Authorization



To Be Completed at least 3 weeks before travel

[GSA - Domestic Per Diem Rates](#)

Traveller Name	<input type="text"/>
CSU ID Number	<input type="text"/>
Department	<input type="text"/>
Destination	<input type="text"/>
Purpose	<input type="text"/>
Dates of Travel	
From Date	<input type="text"/>
To Date	<input type="text"/>

*Per Diem Rate - M & I	<input type="text"/>
Per Diem Rate - Lodging	<input type="text"/>
Per Diem Maximum	<input type="text"/>
<i>Per diem for Meal & Incidentals is reimbursed at 75% for first and last day of travel*</i>	
Estimated Expenses	<input type="text"/>
Portion to be Paid by CSU	<input type="text"/>

Account(s) To Be Charged
<input type="text"/>
<input type="text"/>
<input type="text"/>

Requested Prepayment(s)	
Common Carrier	<input type="text"/>
Registration	<input type="text"/>
Lodging (<i>Students Only</i>)	<input type="text"/>
Prepayment Total	<input type="text"/>

Approver Name	<input type="text"/>
Title	<input type="text"/>
Signature	<input type="text"/>
Approval Date	<input type="text"/>

Approver Name	<input type="text"/>
Title	<input type="text"/>
Signature	<input type="text"/>
Approval Date	<input type="text"/>

Approver Name	<input type="text"/>
Title	<input type="text"/>
Signature	<input type="text"/>
Approval Date	<input type="text"/>

Approver Name	<input type="text"/>
Title	<input type="text"/>
Signature	<input type="text"/>
Approval Date	<input type="text"/>

**Travel paid with grant funds?
Grant Approval (REQUIRED)**

**International Travel?
Provost Approval
(REQUIRED)**

Approver Name	<input type="text"/>
Signature	<input type="text"/>
Approval Date	<input type="text"/>

Provost Name	<input type="text"/>
Signature	<input type="text"/>
Approval Date	<input type="text"/>

Travel Expense Report



Dates of Travel

From Date _____

To Date _____

[illegible]

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TRAVELER'S CERTIFICATE: I certify that all statements made hereon are true, that all expenses are for University business, and, if traveling by personal car, I carry auto liability insurance pursuant to ORC Section 4509.51
(<http://codes.ohio.gov/orc/4509.51>)

Signature _____

Date _____

Date _____

Accounts to be Charged							
	Account	Fund	Dept	Program	Class	Project	Amount
Airfare	0401						
Other Meals Misc	0410						
Lodging	0402						

Other Meals Misc	
Lodging	

	Approver
Name	
Title	
Signature	
Date	

Name	
Title	
nature	
Date	

Approver	
Name	
Title	
Signature	
Date	

Name	
Title	
Signature	
Date	

GRADUATE STUDENT CONFERENCE TRAVEL FUND REQUEST

Please return completed form to grad@csuohio.edu

The College of Graduate Studies makes every effort to support master and doctoral student travel to make presentations at professional conferences.

To be eligible for Graduate Student Conference Travel Funds the student must:

- 1) Be presenting a paper or a poster;
- 2) Be enrolled in a graduate degree program;
- 3) Be in good academic standing during the semester the conference is held;
- 4) Not have received maximum funding (\$500) during the current fiscal year;
- 5) Follow all CSU travel regulations;
- 6) Provide email conference acceptance to present paper/poster.

If funds are awarded, the College will cover 1/3 of the travel cost up to a maximum of \$500. **Before submitting this application to the College of Graduate Studies, the student should secure support from both his/her Department and College, respectively, to match the funds requested from the College of Graduate Studies.** For example, if a student plans to request \$300 from the Graduate Student Conference Travel Fund, he/she **MUST** have an equal commitment of \$300 from his/her Department and College **and** provide the following information on lines 1 and 2 in the table in Section 3.

Line 1:

- 1) Department Chair or Advisor's Contribution Award Amount (example: \$300.00)
- 2) Department Chair or Advisor's Funding Account Number (example: actual account number must be provided)
- 3) Department Chair or Advisor's Signature/Date (example: Individual must sign/date)

Line 2:

- 1) College Dean's Contribution Award Amount (example: \$300.00)
- 2) College Dean's Funding Account Number (example: actual account number must be provided)
- 3) College Dean's Signature/Date (example: Individual must sign/date)

SECTION 1 – STUDENT/CONFERENCE INFORMATION

Student Name: _____ CSU ID: _____ Degree: _____

Name of Conference: _____ Date of Conference: _____

Your participation in this conference (check one): **PAPER PRESENTATION** **POSTER PRESENTATION**

Title of Paper/Poster Presentation: _____

Student Signature: _____ CSU Email Address: _____

SECTION 2 – ESTIMATED TRAVEL EXPENSES

	\$ Amount
Air Fare or Train Fare	
Mileage/Car Rental/Taxi	
Hotel	
Conference Fees	
Meals	
Total	

NOTE Students in STEM discipline:

Before applying for these funds please check the conference website or contact conference organizers for available graduate student travel support.

SECTION 3 – CONTRIBUTION INFORMATION

Line	Person	Award \$ Amount	Funding Account #	Signature/Date
1	Department Chair/Advisor			
2	College Dean			
3	Graduate Dean			
	Total			

After the form is processed by the Graduate Dean, the form will be returned to the student's department for further processing.