Instructions for Completing a Travel Authorization Request (TAR) Form (page 2)
NOTE: ALL information requested below is required

1. Complete Traveler Information - Name, campus identification number (CID#), current date, department, best contact phone number, and number of people traveling (please list all people traveling on the same itinerary; for two or more travelers a memo justifying the reason for multiple travelers must be attached to each person's TAR).

2. Check Employment Status – Please indicate status of employment (Faculty, Staff, Graduate Assistant (GA), Teaching Assistant (TA), or explain if "Other" applies). NOTE: Faculty, please attach page 2 indicating arrangements for classes in your absence; list the course or courses you will be absent from, and the person who will complete this duty for you.

3. Check the appropriate Type of Trip – Please select the type of trip: University business (includes conferences, off-campus teaching, site visits); Student/Group Travel; Recruitment (admissions, athletics, etc.); or Athletics (sporting events).

4. State the Purpose of Trip and How it Benefits ASU – Please state a general purpose/reason for the trip (what is being attended or what business will be conducted on trip). The benefit statement should indicate how this trip is beneficial to the university and pertains to the traveler's job.

5. Complete Departure and Return Information and Destination – Please indicate departure and return dates as well as estimated times. Indicate the city and state or city and country for international travel. **NOTE:** International travel requests must be submitted through the administrative channels to the President's Office at least six (6) weeks prior to departure. Attach the appropriate forms for international travel (Affirmation, Waiver and Liability Release located on Ram Port), for international travel from state funds (Approved memo), or Washington D.C. travel (Washington D.C. travel form located at www.osfr.state.tx.us).

6. Check Form(s) of Transportation – Please indicate all methods of transportation that will be utilized during the trip.

7. Estimated Expenses –Please estimate total expenses for the trip. The Purchasing Department uses the amounts to encumber funds for the trip by classification of expenses. The traveler will also mark the expenses that are prepaid using the ASU Business Travel Account (BTA), Direct pay or purchase requisition (registration only). NOTE: Hotel & Rental Car prepayment will only be available for student groups or those denied a state travel credit card. Please indicate the dollar amount of each service listed for the entire trip regardless if it is to be prepaid:

   a. Airfare - The Travel Office will offer pre-pay services when airfare reservations are made through Horizon's Travel. Travelers are responsible for making their own flight arrangements by calling (325) 658-2436 and indicating prepayment of airfare service to the BTA on the Travel Authorization Request (TAR) Form. The approved TAR must be sent to the Travel Office in order to book the reservation. Be sure the flight information given to Horizon's Travel is your final itinerary. The Travel Office will only provide authorization of payment to Horizon's and will not make changes to the itinerary given by the traveler.
   b. Hotel - The Travel Office will offer pre-pay services for hotels for only student groups and employees who applied for a state travel card but were declined. Those travelers must obtain a hotel reservation, complete a TAR indicating prepayment of hotel service, and submit both to the Travel Office.
   c. Rental Car - The Travel Office will offer pre-pay services for car rentals for only student groups and employees who applied for a state travel card but were declined. Those travelers must complete a TAR indicating prepayment of rental car service, as well as the pick-up/drop-off times and size of vehicle in the memo space on the second page then submit the approved TAR to the Travel Office. The Travel Office will make the car reservation with Enterprise to be directly billed to ASU once paperwork is received.
   d. If a registration needs to be paid in advance by Angelo State University, please complete an online requisition and attach a completed registration form.

8. Travel Advance Request – If requesting a Travel Advance for Student/Group Travel, please indicate the preferred amount requested for advance and date the advance is needed prior to trip.

9. Hotel Overage -   Indicate the local account number to use to charge the hotel fee that is over the state rate. Local funds include all funds within the series: **01xx** Designated Funds; **12xx** Auxiliary Funds; **2xxx** Restricted Funds. Hotel overage is not allowed with state funds.

10. Account Authorization - Indicate the account number, account name, and the amount that will fund the trip. If more than one account is being used, list each account separately with the amount to be encumbered from each account. The financial manager must sign for each account listed. If supervisor is financial manager, sign only on the Department Head/Supervisor line.

11. Signatures - The Travel Authorization must be signed by the appropriate authority for that type of travel (hover your mouse over each signature for more information). Travel Authorizations must be sent to the ASU Purchasing Department for completion.

12. Travel Authorization Request must be completed and submitted prior to traveling.

ANGELO STATE UNIVERSITY
TRAVEL AUTHORIZATION REQUEST
(or Request for Authorized Absence)

_____ **NO Reimbursement Requested**

First Name: _____ Last Name: _____ CID#: _____ Date: _____

Department: _____ Phone: _____ # of Travelers: _____
(Type Justification for 2 or More in Notes section)

Departure Date: _____ Time: _____ AM____ PM____ Return Date: _____ Time: _____ AM____ PM____

Destination (City, State/Country): _____

NOTE: For international travel and Washington D.C., fill out additional forms on RamPort, located on the Work Life tab)

Purpose/Reason for Trip: _____

Benefit to ASU: _____

Employment Status: _____ Faculty*/Staff _____ GA/TA _____ Other-please explain _____
* FACULTY – Please Attach Page 3 if Arrangements are Necessary for Classes in Your Absence

Type of Trip: _____ University Business _____ Student/Group Travel _____ Recruitment _____ Athletics

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Transportation _____ Air _____ Rental Vehicle _____ Private Vehicle _____ University Vehicle
(Please Mark All That Apply)

Estimated Expenses

Pre-Pay on BTA (Business Travel Account)
Please mark all that apply below

Mileage ___ _____ (Round-Trip if Applicable)
(Include Printout of Mileage Calculation – Rand McNally i.e. ASU Rate is $0.58/mile)

_____ Airfare

Airfare _____ (Please Include Ticket Fee)

_____ Rental Vehicle

Rental Vehicle _____

_____ Hotel

Hotel _____ (Please see Max. Rate)

Registration: _____ Online Requisition to be Paid on Purchase Order

Registration _____

_____ Paid on Pro-Card

Meals _____ (Not to Exceed Max. Rate)

Advance Requested (Student/Group Travel)

Incidentals _____ (i.e. Gas, Parking, Bag Fees)

Date Needed: _____

Other Transp. _____ (i.e. Taxi, Shuttle, Metro)

Amount of Advance $ _____

TOTAL _____

Account Authorization and Signatures

Account Number	Account Name	Financial Manager's Signature	Amount
_____	_____	⭐ _____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____

Hotel Overage Authorization (please provide reason for overage and cost comparison on next page)

LOCAL Account Number	Account Name	Financial Manager's Signature	Overage Amt.
_____	_____	⭐ _____	$_____

Signatures

⭐ _____ Date_____
VPAA or Undergraduate Research Travel (Vice Provost Approval Required)

_____ Date_____
Request for Approval (Traveler/Advisor)

_____ Date_____
Vice President (International Only)

_____ Date_____
Department Head/Supervisor

_____ Date_____
Funds Available – Purchasing Office

_____ Date_____
Dean

Prepare original only: (Copies will be distributed by Purchasing)
1 Copy – Department   1 Copy – Dean   1 Copy – VPAA (as needed) Financial Manager (if different from Department Head/Supervisor)
The information you have supplied on this form is maintained by the University. You have the right to review and correct this information by contacting the Travel Office. Updated 6/1/2015

Class Arrangement for Approved Faculty Absence
Please complete and attach to Travel Authorization Request

I have made the following arrangements to take care of my classes in my absence. I will see that they are executed if the trip is approved.

COURSE AND NUMBER	DAY AND TIME OF ABSENCE FROM CLASS	ARRANGEMENT
_____	_____	_____
_____	_____	_____
_____	_____	_____

NOTES (State your justification for hotel overage and two or more travelers to the same destination here; Requires budget authority approval on the second page of the TAR form):

Multiple Traveler Justification:

Hotel Overage Justification (please complete ALL sections):
Reason/Need for Hotel Overage:

Max Allowed Room Rate: X   Nights =

Max. Allowed Rate =

Nights =

Actual Rate:

Actual Rate =

Difference/Overage Amount: