



Student Travel Authorization Form
For students traveling individually (non-employees)
For use with policy 1.10.2 – Student Travel

Please print or type all responses

Name of Traveler:	M#
Academic Department or Student Organization Name:	
Traveler's Phone Number:	- -
Name of Emergency Contact Person:	
Emergency Contact Phone Number:	- -

Purpose of travel:
Itinerary Details (or attach itinerary):

Travel is: Domestic International *Promptly send a copy of all approved Travel Authorization Forms for international travel to UC International ML0640*

Travel Dates: _____ Destination(s): _____

to _____

to _____

to _____

For internal use by unit:

Indicate any dates within travel period that are for personal travel:

Submitted by:

Approved by Sponsoring Department/Organization:

Traveler's Signature*

Type/Print Name

* When using a personally-owned vehicle for travel, this signature certifies the traveler has a valid U.S. or Canadian driver's license and the required insurance coverage.

Signature of Approver*

Date