

International Travel Approval Form

Traveler:

Division:

Destination and Date:

Purpose of the Travel:

Funding source:

☐ **Internal** (Division Funded)

☐ **External** (Source of external funding explained below)

Concur Request ID:

COVID Vaccination Status: (yes/no)

Signature approval of traveler:

Date: _____

I understand that travel may be uncertain, and that I might encounter border closures and other disruptions to international travel that could prevent me from returning home as originally planned.

Signature approval of Division Manager:

Date: _____

(I verify the division has adequate funds to cover this travel expense)

Signature approval of Division Chief:

Date: _____

Signature approval of Associate Chair of Administration:

Date: _____