Travel Approver Form

(Return this form to Controllers Office, General Accounting, Postal Code 0312)

Organization # _____   Mail Code _____

Approvers (Organization Level)

Name	Userid (PID)	Phone #	VT ID #	Select One Option			Level 1st or Final	
				New User	Additional Access	Delete Access	1st	Final
				☐	☐	☐	☐	☐
				☐	☐	☐	☐	☐
				☐	☐	☐	☐	☐
				☐	☐	☐	☐	☐
				☐	☐	☐	☐	☐
				☐	☐	☐	☐	☐
				☐	☐	☐	☐	☐
				☐	☐	☐	☐	☐
				☐	☐	☐	☐	☐

Approval: _____   _____   _____
                    Signed Name   Printed Name   Date
                    Department Head/Director   Department Head/Director

This Section is Optional - Please fill out if applicable

Supervisor Approval - Optional

Assign attribute to organization code to designate the department wants a supervisor approval.
The organization approval is required in addition to the supervisor approval when this option is elected.

	YES	NO
Authorization-Supervisor Approval	☐	☐
Expense Report-Supervisor Approval	☐	☐

Financial Manager (PI) - Optional

Assign attribute to organization code to designate the department wants the financial manager (from FTMFUND) approval.
The department can select financial manager approval for just OSP funds or all funds in the organization. If option is selected, please indicate "ALL" Funds or "OSP" Funds.

	YES	ALL OR OSP		NO
Authorization-Financial Manager (PI)	☐	☐	☐	☐
Expense Report-Financial Manager (PI)	☐	☐	☐	☐