

North Carolina State University

Physics Department

Travel Pre-Authorization Form

Name \_\_\_\_\_

Destination \_\_\_\_\_

Date and Time of Travel: Start \_\_\_\_\_ Return \_\_\_\_\_

Purpose of Trip \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimate of Total Cost \$ \_\_\_\_\_

\_\_\_\_\_  
Traveler

Date

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
PI (for grant travel)

Date

\_\_\_\_\_  
FAS Acct # (for grant travel)

\_\_\_\_\_  
Department Head

Date