Instructions: Travel Authorization Request Form - Group Travel

When a field is active on the form, it will be highlighted in yellow. The form begins on page 5.

Section I: Traveler Information	
Field	**Description/Instructions**
Name	Enter the first and last name of the traveler.
ID#	Enter the traveler's University assigned ID number. Must be 9 characters. (i.e. A00123456)
Title	Enter the traveler's job title.
Department	Enter the traveler's department.
Email	Enter the traveler's email address.

Section II: Encumbrance Information	
Field	**Description/Instructions**
Encumbrance No.	Enter the encumbrance number from Banner. Must be 8 characters. (i.e. E0012345) **You must complete this form first, enter the encumbrance in Banner, then add the encumbrance number on this form.**
FOAP No.	Enter the fund, org, account, and program codes used on the encumbrance. An additional FOAP section is provided in case the encumbrance was allocated to two FOAPs. *Reference the Travel Account Code Cheat Sheet for assistance.*
Contact Name for Questions about this Encumbrance	Enter a first and last name
Contact Email	Enter the email address for the person listed in the last field.
Contact Phone Extension	Enter a 4 digit phone on-campus phone extension.

Section III: Trip Information	
Field	**Description/Instructions**
Where are you traveling?	Enter the city and state of your destination. If traveling outside the country, indicate the country name as well.
Why are you traveling?	Enter the purpose of your travel request. Include the name of the event, or, if an athletics event, indicate the opposing team, sport, and game time.
Departure Date	Enter the date your travels will begin. Use format MM/DD/YYYY.
Departure Time	Enter the estimated time of day your travels will begin. AM or PM must be entered.
Return Date	Enter the date your travels will end. Use format MM/DD/YYYY.
Return Time	Enter the estimated time of day you will return from the trip. AM or PM must be entered.
Total Travel Days	This is a calculated field that will indicate how many days you are traveling. You cannot enter text in this field.
No. of student travelers	Enter the number of students traveling with you.
No. of non-student travelers	Enter the number of non-students traveling with you. Include yourself in this number.
Total Travelers	This is a read-only field that will calculate the total number of travelers.
Prepaid Registration?	Check YES if you need Accounts Payable to prepay your registration fees. Check NO if this service is not requried.
Vendor ID	If you checked YES to the last question, enter the vendor ID (A number) of the vendor. If the vendor is new, contact the Purchasing department to request a vendor ID.
Registration Fee	Enter the amount of the registration fee.

| Section IV: Transportation	
Field	**Description/Instructions**
Section Note	This section has pop-up boxes that will appear depending on your selection for your mode of transportation.
How will you travel to your destination?	Select your mode of transportation from the dropdown list of options. If airfare, train, or rental vehicle are chosen, enter the amount in the Total Transportation field. If Personal Vehicle is selected, enter the total miles roundtrip in the designated field. The current state reimbursement rate will appear and the Total Transportation field will be calculated and you will not be able to enter text in that field.
What are the total miles, roundtrip?	If you selected Personal Vehicle as your mode of transportation, enter the total miles, roundtrip.
State Reimb Rate	This is a read-only field that will only appear if Personal Vehicle is selected.
Total Transportation	If you selected airfare, train, rental vehicle, BTS bus, or other, enter the amount in this field. If personal vehicle is selected, the current state reimbursement rate will appear and this field will be calculated for you.

Instructions: Travel Authorization Request Form - Group Travel

*When a field is active on the form, it will be highlighted in yellow. The form begins on page 5.*

Section V: Meals	
Field	**Description/Instructions**
Section Note	This section is separated for in-state and out-of-state travel. The Meals & Incidentals Calculation Sheet must be attached for meal expenses requested in this section. If traveling out-of-state, you must click the GSA link provided and attach the Meals & IE tabs for each travel location.
If NOT traveling overnight, how long is your stay?	Select the length of your stay from the dropdown box if you are not staying overnight.
Daily Student Meal Cost	Enter the cost of meals for one student, for one day. The total will be calculated for you based on the number of students and the total travel days from section III.
Daily Non-student Meal Cost	Enter the cost of meals for one non-student traveler, for one day. The total will be calculated for you based on the number of non-students and the total travel days from section III.
Section VI: Lodging	
Field	**Description/Instructions**
Vendor Name	Enter the name of the vendor that will be used for lodging.
Vendor ID	Enter the ID (A number) of the vendor that will be used for lodging. If the vendor is new, contact the Purchasing department to request a vendor ID.
How many rooms?	Enter the number of rooms that will be reserved.
How many nights?	This is a read-only field that will calculate the number of nights, based on the travel dates entered in section III. If this field has a negative number, please enter travel dates in section III.
Cost per night	Enter the estimated cost per room, per night, including taxes. If the rate changes based on the day, enter and average amount or the highest rate.
Section VII: Miscellaneous Expenses	
Field	**Description/Instructions**
Taxi/Shuttle/Subway	Enter any estimated expenses related to taxi, shuttle, or subway usage.
Parking	Enter any estimated parking expenses.
Baggage Fees	Enter any estimated baggage fees.
Gas *(rental/univ vehicle only)*	Enter any etimated gas expenses. Gas may only be claimed as an expense if the mode of transporation is rental or university vehicle.
Other	Enter any other estimated expenses. Use this section to enter a description.
Amount	Enter the amount for "other" expenses.
Other Sections	
Expense Summary	This section will calculate each expense item described.
Travel Advance	Check this checkbox if you are requesting an advance for your travels.
Required Signatures	Traveler and Department Head are required on all requests. Other signature requirements will vary based on department protocol.

GSA Per Diem Lookup Instructions

1. Clicking the link will take you here.
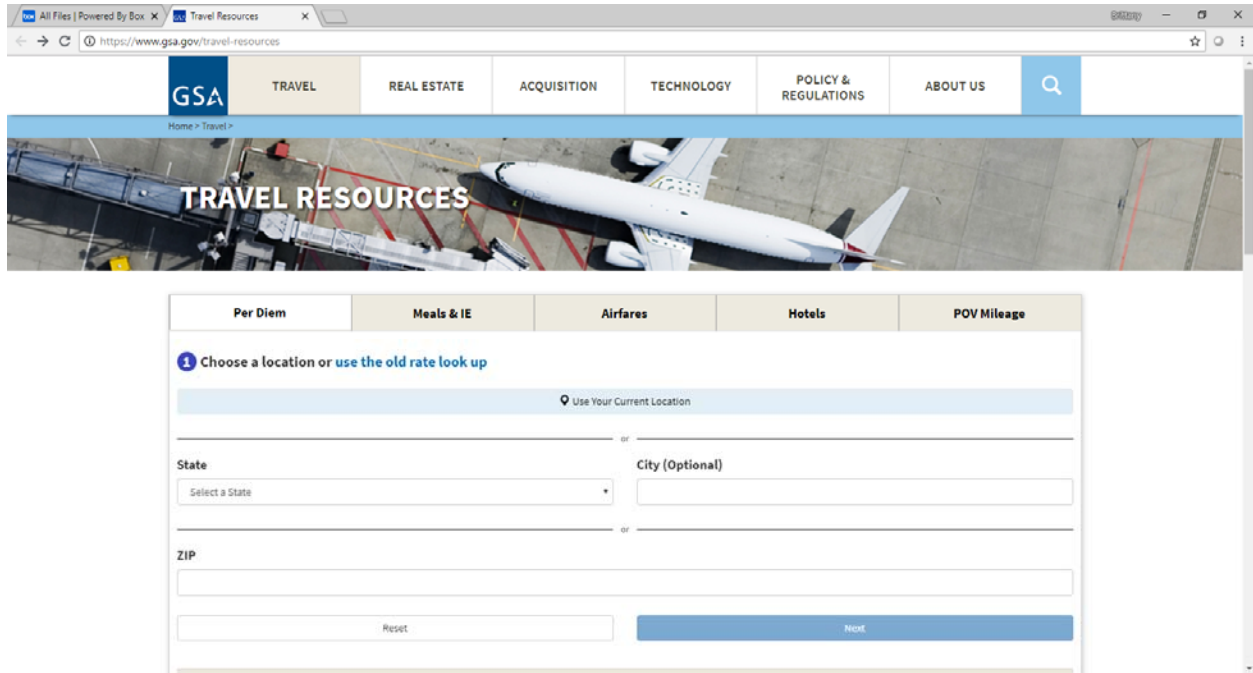
2. Select your destination state. Enter a destination city. Click Next.
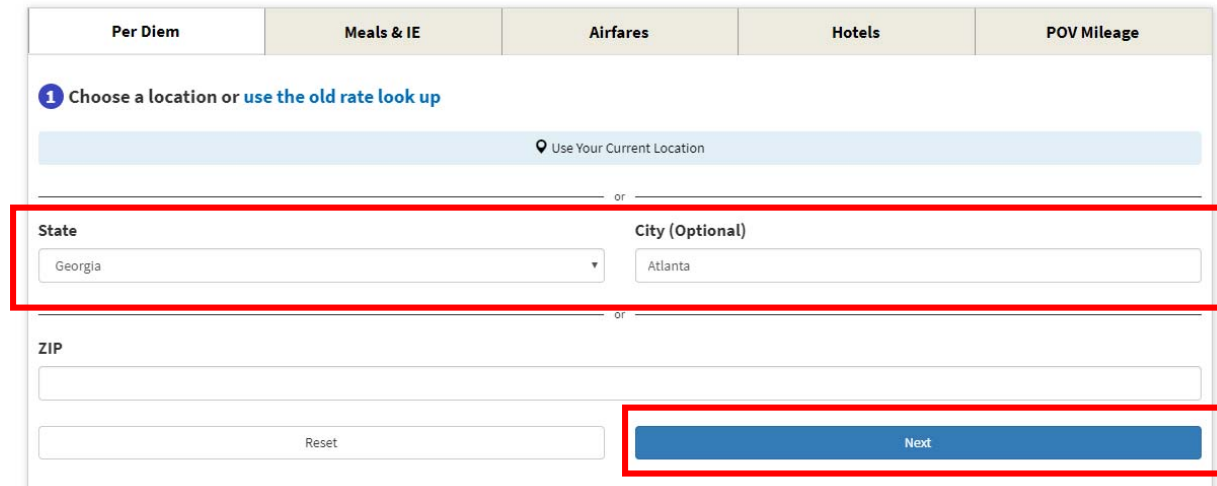
3. Click **Calculate Per Diem Allowances for a Trip**. Enter your travel dates. Click Next.

(RATES ARE AVAILABLE BETWEEN 10/01/2012 AND 09/30/2018)

| Start Date | 07/30/2018 | 🗓 | | End Date | 08/03/2018 | 🗓 |

| Back | | Next |

4. The Per Diem tab will appear. Click **Print Results**. Attach this page to your travel request.

Per Diem	Meals & IE	Airfares	Hotels	POV Mileage

Your search for Atlanta, Georgia

USING RATES FOR FULTON / DEKALB / COBB INCLUDING ATLANTA:

Daily Per Diem Rates:
July Lodging: $148
July M&IE: $69
August Lodging: $148
August M&IE: $69

Use the "M&IE" rate to determine the per diem amounts for breakfast, lunch, dinner, and incidentals.

Estimated Per Diem Total: $902.50

Breakdown ⌄

Additional Terms & Conditions ⌄

| New Search | | Print Results |

5. Click the **Meals & IE** tab. Using the M&IE amount from step 4, enter the breakfast, lunch, dinner, and IE rates on your travel request.

Per Diem	Meals & IE	Airfares	Hotels	POV Mileage

Meals & Incidental Expenses

This table lists the six M&IE tiers in the lower 48 continental United States. Use the Per Diem rates tab above to look up a travel location and find its total M&IE. Locate that amount in the first "Total" column of the table below. The corresponding row provides specific meal breakdowns for the tier. The portion of the M&IE rate provided for incidental expenses is currently $5 for all tiers.

Total	Breakfast	Lunch	Dinner	IE
$51	$11	$12	$23	$5
$54	$12	$13	$24	$5
$59	$13	$15	$26	$5
$64	$15	$16	$28	$5
$69	$16	$17	$31	$5
$74	$17	$18	$34	$5

Refer to the breakdown of FY 2017 meals and incidental expenses (M&IE) for full details on current federal allowances in the continental United States.

GROUP TRAVEL AUTHORIZATION REQUEST FORM

Fill in form electronically, print, obtain all required signatures, and submit hard copy to the Comptroller's Office (Accounts Payable). Electronic submissions are accepted via Box or email (princess.ritchie@aamu.edu or accounts.payable@aamu.edu). Supporting documentation for each amount in the Expense Summary section must be attached when submitted.

SECTION I: TRAVELER INFORMATION

Name: _____   ID# **A** | | | | | | | Title: _____

Department: _____   Email: _____

SECTION II: ENCUMBRANCE INFORMATION

Encumbrance No: | | | | | | | FOAP No: _____ - _____ - _____ - _____

FOAP No: _____ - _____ - _____ - _____

Contact Name for Questions about this Encumbrance: _____

Contact Email: _____   Contact Phone Extension: _____

SECTION III: TRIP INFORMATION

Where are you traveling (city, state, country)? _____

Why are you traveling? _____

Departure Date (mm/dd/yyyy) _____   Departure Time _____   ***AM or PM must***   Total Travel Days: _____

Return Date (mm/dd/yyyy) _____   Return Time _____   ***be entered.***

No. of student travelers: _____   +   No. of non-student travelers: _____   =   Total Travelers: _____

Does this trip require prepaid registration? _____ YES _____ NO   Vendor ID: _____   Registration Fee: _____

SECTION IV: TRANSPORTATION   *(Airfare-in-lieu of Mileage rule applies. See section III. F. ii. b. of the Travel Policy.)*

How will you travel to your destination? _____

What are the total miles, roundtrip? _____   Total Transportation: _____

SECTION V: MEALS   *(see page 2 for detailed instructions)*

If NOT traveling overnight, how long is your stay? _____

Enter the meal costs **per person.**

Daily Student Meal Cost: _____ x No. of student travelers x Total Travel Days = Total Meal Cost _____

Daily Non-student Meal Cost: _____ x No. of NON student travelers x Total Travel Days = Total Meal Cost _____

SECTION VI: LODGING

Hotel Name: _____   Vendor ID: _____

How many rooms? _____ **x** How many nights? _____ **x** Cost per night (including taxes): _____

SECTION VII: MISCELLANEOUS EXPENSES

Taxi/Shuttle/Subway: _____   Parking: _____   Baggage Fees: _____   Gas: _____
(rental/univ vehicle only)

Other (enter description): _____   Amount: _____

EXPENSE SUMMARY

Registration Fee _____
Transportation _____
Meals _____
Lodging _____
Miscellaneous _____

TOTAL _____

Check here if an advance

is requested: _____

(Restrictions apply. Amount requested may not be amount disbursed. See Travel Policy for details.)

REQUIRED SIGNATURES

_____   _____
Traveler's Signature   Date

_____   _____
Approved by - Department Head Signature   Date

_____   _____
Approved by - Dean/Director Signature   Date

_____   _____
Approved by - Other Signature   Date