



International Travel Request Form for **Faculty and Staff Only**

This form is not to be used for student travel. International student travel is reviewed through the ATU Office of Study Abroad.

Instructions: Complete all steps prior to entering travel requisition for any international travel destination.

1. Complete each field and forward to attach any additional justification information.
2. Obtain all necessary supervisory approvals.
3. Forward approved and completed form with attachments to Jennifer Fleming, Office of the President, jfleming@atu.edu with subject line formatted as such *Last Name-Department-International Travel Request-Dates of Travel*.
4. The President will review your request and approve or deny and return your request form to you. If approved, please reach out to Travel Services at travel@atu.edu for assistance in securing your reservations.

Purpose

This form must be completed and approved prior to any university-related international travel to ensure compliance with ATU policies, risk management, and financial regulations.

1. Traveler Information

Name: _____

T Number: _____

Job Title: _____

Department: _____

Campus: Russellville Ozark Online

Phone Number: _____

Email Address: _____

2. Travel Details

Destination Country/Countries: _____

City/Cities: _____

Purpose of Travel: Conference Research Teaching/Program Support Academic

Collaboration Recruitment Other: _____

Brief Description of Travel Purpose: (Additional pages may be submitted to support justification of the trip.)

Departure Date: _____ Return Date: _____ Total Days: _____

3. Funding Information

Estimated Total Cost: \$ _____

Funding Source(s): Department Budget Grant Foundation External Sponsors
Other: _____

Index Code(s): _____

4. Conference or Event Information (if applicable)

Name of Conference/Event: _____

Host Organization: _____

Conference Dates: _____

Presentation Planned? Yes No

If yes, title: _____

5. Risk, Safety, and Compliance

Is destination under U.S. State Dept Level 3 or 4 Advisory? Yes No Unsure

Traveling with students? Yes No-*If your answer is yes, stop here and contact the ATU Office of Study Abroad.*

Emergency Contact Name: _____

Emergency Contact Phone: _____

Primary Contact in Country

Name: _____

Address: _____

Phone: _____

Email: _____

6. Required Acknowledgements

I acknowledge compliance with ATU policies, funding rules, and travel safety requirements.

7. Signatures and Approvals

Traveler Signature: _____ Date: _____

Supervisor/Dept Head Printed Name: _____

Signature: _____ Date: _____

Dean Printed Name: _____

Signature: _____ Date: _____

Vice President Printed Name: _____

Signature : _____ Date : _____

For President's Office Use Only:

Approved Denied

President's Signature: _____ Date: _____