



**Student Travel Authorization Form**  
*For students traveling individually (non-employees)*  
*For use with policy 1.10.2 – Student Travel*

**Please print or type all responses**

Name of Traveler:	M#
Academic Department or Student Organization Name:	
Traveler's Phone Number:        -        -	
Name of Emergency Contact Person:	
Emergency Contact Phone Number:        -        -	

Purpose of travel:
Itinerary Details (or attach itinerary):

Travel is:	Domestic	International	<i>Promptly send a copy of all approved Travel Authorization Forms for international travel to UC International ML0640</i>
Travel Dates:	Destination(s):		
to	_____		
to	_____		
to	_____		

<b>For internal use by unit:</b>

Indicate any dates within travel period that are for personal travel:

**Submitted by:**

**Approved by Sponsoring Department/Organization:**

\_\_\_\_\_  
 Traveler's Signature\*

\_\_\_\_\_  
 Type/Print Name

\* When using a personally-owned vehicle for travel, this signature certifies the traveler has a valid U.S. or Canadian driver's license and the required insurance coverage.

\_\_\_\_\_  
 Signature of Approver\* Date