				W	VEC IK	AVEL AUTHOR	IZATION FOR	KIVI (IA	V	
SECTION 1	TRAVE	LER IN	FORMATIO	ON						
Traveler:						UFID:			Email:	
Destination of						Depart			Return	
Trip: Date/Time: Date/Time:								Date/Time:		
Purpose of Trip – What is the reason for this travel:										
Dept ID		Fund Program CRRN			T/CYFWD Project # or Name		Flex Code	CRIS	S Funding Notes	
Берств	Tunu		Hogram	CITITI	/CII VVD	110ject # Of Name	Tiex code	Citio	5 Tunding Notes	
Benefit to UF/Project – How does this trip benefit the										
chartfield you are charging above? Please explain in detail:										
SECTION 3 EXPENSES										
Business Expense		LIC Doord		 	Amount and Type of Paymen				Please use section 4 for additional space for more info	
Description			UF Pcard		Personal Funds		Comp/Travel Grant		Comments / Vendor Names / Helpful Info	
Registration										
Airfare										
Lodging										
Car Rental Car Rental										
Fuel for Rental										
Mileage (0.445/Mile) Personal Car only										
Taxi/Shuttle/Train										
Baggage Fees										
Parking										
Tolls										
Meals B-6.00 L-11.00 D-19.00										
Other										
Totals										
SECTION 4 COMMENTS (HELPFUL INFORMATION)										
CECTION	***=	DEIO:	TD 41 /F: 44	** ~ *						
SECTION 4						e te Section 4 if th i	•			
	(initials) I have consulted with my medical provider or a travel clinic about my international travel and have received necessary vaccines and travel medication.									
	(initials) I have reviewed the guidance on this webpage https://research.ufl.edu/compliance/export-controls/international-travel.html									
	(initials) I have contacted the Division of Research Compliance and Global Support for assistance with export licenses or other authorizations.									
	http://research.ufl.edu/compliance.html#ComplianceContact									
(initials) As required I have registered my international travel with the International Center https://internationalcenter.ufl.edu/node/116 and have received my TeamAssist card.										
(initials or n/a) If I am traveling to an embargoed country, I have additionally read the UF policy at https://internationalcenter.ufl.edu/travel/us-										
export-controls-embargoed-countries, and as required I have contacted Dean Leonardo Villalón.at UF International Center.										
-	(initials) I plan to take University-owned equipment to a foreign country, and I have completed a Foreign Travel Request at http://www.fa.ufl.edu/departments/asset-management/annual-inventory-off-site-certifications-foreign-travel-with-equipment-request/									
			/departmen	ts/asset	t-manage	ement/annual-inven	tory-off-site-cert	itications	s-toreign-travel-with-equipment-request/	
SECTION 5	SIGNAT Lhereby		that this is	for offic	rial husin	ess of the University	of Florida and w	ill he ner	formed for the nurnose(s) stated	
I hereby certify that this is for official business of the University of Florida and will be performed for the purpose(s) stated. ***BUDGET AUTHORITY SIGNATURE IS REQUIRED FOR ANY TRAVELER OTHER THAN THE PI OF THE PROJECT***										

Traveler's Signature **Budget Authority Signature (PI)**

Date