



UNIVERSITY OF
MARYLAND
COLLEGE OF INFORMATION

Business Office Use:

KFS# _____

REF# _____

TAR# _____

INFO Travel Approval Form – NON-INFO EMPLOYEE

(ALL SECTIONS MUST BE COMPLETED)

*COMPLETED FORMS SHOULD BE EMAILED TO infoadmin@umd.edu with a completed and signed [W-9](#)

PERSONAL INFORMATION	
Full Name (Last, First)	
Mailing Address	
Email	
Phone	
iSchool Sponsor	

TRIP INFORMATION	
Mode of Travel	<input type="checkbox"/> Air <input type="checkbox"/> Rail <input type="checkbox"/> Personal Vehicle
Travel From (City & Airport)	
Travel To (City & Airport)	
Departure Date	
Return Date	
Travel Agency	Collegiate Travel Planners (CTP) <input type="checkbox"/> Booked Own Travel
Additional Travel Info (i.e. multiple destinations, personal travel included, etc.)	
Trip Purpose	

FUNDING	
Account Number*	

*If grant or contract funds, your signature below certifies travel is directly related to the project and within the scope of the approved budget.

ESTIMATED EXPENSES	
Transportation*	
Lodging	
Per Diem	
Registration Fee	
Other	
TOTAL:	

*Includes air, rail, ground transportation, and mileage.

Domestic Per Diem Rate

Breakfast

Lunch

Dinner _____

[International Per Diem Rates](#)

Mileage Reimbursement

Rate: \$0.70/mile

APPROVAL SIGNATURES	
Traveler Signature	
Trip Sponsor/PI	

This travel form and a completed W-9 must be completed and submitted by all visitors in an official capacity prior to the trip.

Please Review [UMD's Traveler's Guide](#) Prior to Trip