



The University of Texas at El Paso
College of Liberal Arts
INTERNAL TRAVEL AUTHORIZATION FORM



Traveler Status: _____ Faculty _____ Staff _____ Student _____ Other _____

Section 1: Traveler Information

Legal Name: _____ EMPL ID: _____
(as shown on your passport) (First Name, Middle Name, Last Name)

Department: _____ Title: _____

Email Address: _____ Cell Phone #: _____

Destination: _____ Dates of Travel: From: _____ To: _____

Are you doing business in Washington, D.C.? () *YES () NO *If yes, include the purpose (agency/congressional visit, meeting, etc):

Purpose of Trip: (Event/Conference/Meeting Name, acronyms are not acceptable. If presenting paper, include name of paper. If this is research/grant related, please provide the benefit, how it relates to the project, where the research is being conducted, e.g. archival research in special collections, institution, etc. Provide as much detail/information as possible.):

Disposition of duties while absent: (Include arrangements to cover your classes, advising and other responsibilities in your absence, if applicable.)

() Check here if travel expenses are to be paid by another entity, **NO COST TO UTEP**, then skip to Section 4

Section 2: Travel Reservations (Hotel booked directly by Traveler)

Flight: (Booked and direct billing through Anthony Travel)
 Flight Needed? () *YES () NO *If yes, please complete info below
 Date of Birth: _____
 Preferred Airline & Flight Number: _____
 Depart Date: _____ Return Date: _____
 Preferred time of day: ___Morning ___Mid-day ___Evening
 Rapid Rewards: _____
 Trusted Traveler #: _____

Car Rental: (Reserved and direct billing through Anthony Travel)
 Car Rental Needed? () *YES () NO *If yes, please complete info below
 If yes, please complete the following:
 Location to pick-up vehicle: _____
 Pick-up Date: _____ Return Date: _____
 Size of Vehicle: _____
 Type of Travel:
 Business: _____ Conference: _____

Section 3: Estimated Travel Expenses

Costs: (for reimbursement purposes only)
 Registration Fees: \$ _____
 Flight: \$ _____
 Transportation/Parking Fees: \$ _____
 Hotel Per Diem for _____ Days \$ _____
 Meals Per Diem for _____ Days \$ _____
 Other: \$ _____
TOTAL Reimbursement : \$ _____

Funding Sources: (can only use one funding source for flight and car rental)
 Cost Center/Project ID: _____ Department: _____
 Cost Center/Project ID: _____ Department: _____
 Cost Center/Project ID: _____ Department: _____

Comments: _____

Section 4: Travel Approvals (electronic approvals accepted)

Department Director/Chair: _____ Date: _____

Alternate Approver (optional): _____ Date: _____

Section 5: Office Use Only

Department Administrator: _____ Date: _____

Travel Authorization Number: _____

Travel Reservations:

Option #1: Concur Online Booking Tool
 Website: concursolutions.com
 Phone: 1-800-924-6619

Option #2: Anthony Travel Agent
 Email: UTTravel@AnthonyTravel.com
 Phone: 1-844-260-4880

Travel Resources:

www.utep.edu/travel/planning-your-trip/
www.utep.edu/travel/resources/
www.utep.edu/travel/travel-notice/