

CSU History Department
International Travel Request Form

Submit Form to: allison.pine@colostate.edu

***Attention*: Until Further Notice, all International Travel must submit a Travel Exception Authorization form.**

Due to CSU Risk Management and Insurance processes, International Travel requests need to be made a minimum of two weeks in advance of your planned departure date.

Today's Date: _____

Your Name: _____

Your Home Address: _____

Travel Location and Purpose

(If there will be multiple locations and/or events please include name and location for each):

1. Location: _____ Event: _____

Purpose: _____

Travel start date: _____ Start time: _____ Travel end date (return to Fort Collins): _____

OR Add Segment 2 of trip below.

2. Location: _____ Event: _____

Purpose: _____

Travel start date: _____ Start time: _____ Travel end date (return to Fort Collins): _____

Account Name and Number to be charged. If Professional Development funds from the History Department will pay the travel cost then enter "Department" with no account number needed:

Account Name: _____ Account #: _____

For travel billed to research accounts- Principal Investigator name: _____

PI and traveler will be informed regarding estimated travel expenses in a joint email message.

Anticipated Expenses: Check all that apply

_____ Airfare booked through a State Approved Travel Agent (see list of State Approved Travel Agencies). Once the airline itinerary has been confirmed, Travel Arranger will confirm travel authorization number via email.

_____ Airfare, booked via Internet purchase. Per CSU travel rules, you are required to contact a State Approved Travel Agency to obtain a **written** comparison airfare quote and provide the quote to the History Department prior your travel departure.

_____ Written Comparison Quote Attached:

Cost quoted by Travel Agency: _____ Cost paid through Internet Purchase: _____

If purchasing airfare through the Internet, explain why the purchase is/was made via the Internet rather than using an approved travel agency _____

_____ Personal vehicle to and from Denver International Airport (DIA). Mileage is currently at 52 cents a mile.

_____ Location from where you will be departing: _____

_____ Personal vehicle to a location other than DIA, list destination location and address:

_____ Parking at DIA (a receipt is required if the cost is more than \$25.00)

_____ Groome Shuttle Service (a receipt is required stating total cost, your name and how paid). To reserve Groome Shuttle Service call (970) 226-5533 or make your reservation at <https://groometransportation.com/fort-collins/>. When making the reservation use the CSU Discount **CSUEMP**.

_____ Rental Car (a receipt is required stating total cost, your name and how paid). See list of State Approved Rental Car Agencies, applicable discount codes, and insurance coverage information.

_____ Parking at locations in destination city (a receipt is required for reimbursement)

_____ Shuttle, Uber, Lyft at destination city (receipts required, tipping allowed at maximum of 10%)

_____ Lodging (examples Hotel, Motel, Airbnb, Other, Sponsor Housing). Estimated lodging cost: _____

Destination city lodging per diem rate will be used for Travel Authorization if lodging cost is unknown. After travel please provide a hotel folio receipt stating guest name, amount paid, and payment method for reimbursement.

_____ Meals (no receipts are required if meals are paid per diem rate for the location. **Note:** CSU does not reimburse meals for one-day travel).

_____ Conference Registration (receipt required with conference name, cost, how paid, and who paid)

_____ Membership Fees (receipt is required showing cost, who paid and method of payment). Membership Fees will not be paid through a Travel Reimbursement; reimbursement will be completed via a Disbursement Voucher.

_____ Other (state item, examples are poster printing, entrance tickets to museums, toll road fees, etc.):

See next page for additional International Travel Information

INTERNATIONAL TRAVEL:

*International Travel requires additional information and approval by CSU Risk Management.
Please provide the following.*

Are you a United States Citizen: Yes _____ No _____

Name, address and telephone of lodging location from date _____ to date _____

Name, address and telephone of lodging location from date _____ to date _____

Cell phone number where you may be contacted while on International Travel: _____

Emergency contact name, relationship, and telephone number, while you are on International Travel:

Have you visited this destination(s) before? NO _____ YES _____

If YES, please describe how recently and for how long?

What modes of transportation will you use while on international travel (check all that apply):

_____ Airplane

_____ Rental Car

_____ Walking

_____ Train

_____ Ship

_____ Host Vehicle

_____ Bus, Taxi

_____ Other, explain _____

After Travel - submit all receipts to Travel Arranger (Allison Pine) within 7 to 10 business days per departmental policy.

Office Use Only:

Date Request Received: _____

Date Travel Authorization Completed: _____

Account Number Encumbered: _____

Confirmation Email Sent: _____ TEM Number: _____

Risk Management and Insurance Approval Date: _____

RMI Number: _____

Date RMI Number added to Travel Authorization: _____