

AUTHORIZATION FOR OUT-OF-STATE TRAVEL
FOR RCUH/PCSU EMPLOYEES

(This information required 4 weeks prior to trip for on line processing/submittal)

Traveler's Name _____

Employee# _____ Title _____

Actual Departure Date _____

Actual Return Date _____

Purpose of Trip _____

Itinerary (including personal stopovers) _____

Do you want per diem advanced? () Yes () No

Check mailing address: _____

[] All travel expenses (including per diem) paid by another agency

[] Personal/vacation days taken during trip (month and date/city, state)

[] Using RCUH credit card for car rental (submit original receipt with
Travel Completion)

[] Using Personal credit card for car rental (submit original receipt)

[] P.O. request for () Car rental () Conference fee

() Airfare for Travel Agency () Other _____

For purchase orders, please provide the following information: Name and address of vendor, description of purchase, subtotal, taxes, vendor's fax number, telephone number, and contact person (if available).

[] Request per diem at low cost rate if going to low cost area (only if you
are concerned with your taxability level)

[] Other request _____

Please mail original signatures to:

Pacific Cooperative Studies Unit

3190 Maile Way St. John 408

Honolulu, HI 96822-2279

This form is available on-line at <http://manoa.hawaii.edu/hpicesu/forms.htm> . Include documentation supporting the purpose of your travel. If taking personal days off, email Dana Fukata (dfukata@hawaii.edu) or fax to 808-956-4710 your requested itinerary as well as an itinerary without personal days off (indicating the earliest departure and return).

Travelers Signature _____ Date: _____

Supervisor Signature _____ Project No. _____