Controller's Office Florida Agricultural & Mechanical University

Request for Foreign Travel

Travel Rep. Name		Travel Rep. Phone Number		
Travel Rep. Email				
			1	
Traveler's Name		Traveler's Employee ID		
Destination(s)	From/Tra	avel Dates	To/Travel Dates	
Justification for Foreign Travel:				
]

Approvals below indicates the above named traveler has been approved for foreign travel.

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Signature of Dean	Printed Name of Dean
*Signature of International Programs	Printed Name of International Programs
Signature of Provost	Printed Name of Provost
Signature of President/Designee	Printed Name of President/Designee

*Send form to the Provost office for signature and scanning into Image Now. After President's Approval form should be routed to the Travel Office to complete process.