

University of Illinois at Chicago
College of Engineering
Request for Faculty Travel Approval

This form is to be submitted to the Department before commencing travel. Please print or type the following information. (Prior written approval is required for any travel)

Date of Request _____

Department _____

Name _____

Destination(s) _____

Date of Departure _____

Duration of Trip (days) _____

Amount of Request _____

Source of Funding: (check one)

A) Dept _____

B) Grant _____

C) Other _____

Purpose of Trip (i.e. name(s) of events, etc.)

To be posted on the web (circle one)? Yes No

If yes, please provide an appropriate description of the trip: _____

Coverage of Classes and/or Other Duties (please indicate faculty member acting on your behalf during your absence)

Traveler's Signature Date

Department Head Signature Date