

Integrative Biology Pre-Travel Form

**THIS FORM WILL NOT BE ACCEPTED WITHOUT AN ESSENTIAL TRAVEL APPROVAL FORM
ATTACHED OR ON FILE**

The following information is required for University related/sponsored overnight travel. When you have completed this page, please click the 'Submit' button at the end to route to Tresa in the IB Office. Further information about IB travel, and instructions for this form, can be found here.

NAME OF TRAVELER(s): _____ **OSU ID:** _____

DEPARTURE DATE: _____ **RETURN DATE:** _____

DESTINATION (or general lodging location): _____

Add'l locations/dates (if needed): _____

Add'l locations/dates (if needed): _____

Add'l locations/dates (if needed): _____

PURPOSE OF TRAVEL: This information can mirror your Essential Travel Form in brief. If this is conference travel, please include the name of the conference/organization and a web link if available.

INTERNATIONAL TRAVEL: Have you complete your online registration? Yes¹ No²

¹Please email your confirmation to Tresa, howlinst@oregonstate.edu

²The IB office will complete this on your behalf

ESTIMATED TRAVEL COSTS:

<u>Paid by?</u> Dept. Traveler	<u>Paid by?</u> Dept. Traveler
Registration: _____	Meals: _____
Airfare: _____	Vehicle Expense: _____
Lodging: _____	Other: _____

TOTAL: _____

INDEX: _____

2nd INDEX (if needed): _____

I certify this travel is necessary and the required funds are available:

Principal Investigator (PI) if travel is related to a grant

Date