

MLLL
Concur & Travel Pre-Authorization Request

PAPERLESS: Do NOT print.

Please email with the subject line "Pre-Authorization" to:
ntobin@ou.edu and m3lbudget@ou.edu 30 days prior to your
travel start date.

1) Personal

2) Business

3) Traveler Name: _____ Section: _____

4) Destination: _____

5) Expected departure date & time: _____

6) Expected return date & time: _____

7) Purpose of trip:

8) Who will handle your responsibilities in your absence?

9) How can you be reached during this time, including University non-working hours?

10) To be completed only for travel while on business.

Funding expected to be charged: _____

(MLLL Faculty Funds, Grant Funds, Fellowship Funds,
Personal Funds, ect.)

Estimated travel expenses:

Airfare:	\$ _____
Public Transportation:	\$ _____
Per Diem:	\$ _____
Lodging:	\$ _____
Registration:	\$ _____
Mileage: _____ miles @ \$_____/mile = \$ _____	
Local Transportation:	\$ _____
Parking:	\$ _____
Other: _____	\$ _____
Other: _____	\$ _____
Total estimated cost:	\$ _____