

N C State University - Non-Employee Travel Authorization Form (AP104) (This form has embedded drop down boxes. If you click on a box and you see an arrow that means it has a drop down list to select from. Otherwise you will need to key in the requested information.)

Traveler's Name (Last/First/Middle)		Traveler's Vendor Number	Q&As	Rules
Jenkins JoJo Lue		88888	Brittany	919-555-8974
Travel To (Destination)		Travel Begin Date	Travel End Date	
Miami, FL		August 25, 2017	August 31, 2017	
Explain what the travel is for (Please be specific and do not use acronyms):				
Customer Focus Conference				
Select the service / benefit provided to the University by this trip:		<i>To meet with specific individuals related to community service, program services, research endeavors, or related committee assignments</i>		
Is the non-employee traveler a student?		Yes		
Is this travel for In-State, Out-of-State or Out-of-Country?		In State		
Is traveler a non-resident alien?	No	If a non-resident alien, indicate visa type.		
<i>If a non-resident alien, please mark "yes" in the box above. If not, continue to the Travel Commitment section.</i>				
Controller's Office Tax Specialist			OK	

Travel Commitment (by Expense Type)	
Air Fare	459.00
Mileage	258.00
Vehicle Rental	159.00
Parking	115.00
Other Ground Transportation	165.98
Conference / Registrations	150.00
Lodging	1900.00
Meals	150.00
Other Travel Expenses	35.00
Total Projected Expenses	3391.98

Specific Authorizations (Select Yes or No)	
Over-Night Travel (including lodging and meals)	Yes
Excess Lodging Rates	Yes
Excess Meals For International Trips	No
Business Class Airfare For International Trips	No
Vehicle Rental	No
Use of Private Vehicle	Yes
Attendants for Handicapped Employees	No
Other Departmental Items (explain):	

FOR OUT OF UNITED STATES TRAVEL ONLY

If travel is for out of the United States, Please answer the following questions. Questions 1 & 2 must be answered "yes" and question 3 either "yes" or "na". If you need to consult someone regarding these questions contact the Compliance Officer at SPARCS! If travel is within the United States only, this section is not applicable, go to the traveler's certification.

List of Countries	Please note the country you are traveling to in the box to the right:	None
1 - Have you reviewed the SPARCS web site regarding federal laws regarding export controls and acknowledge your personal responsibility to comply with those laws and the personal consequences of failure to comply? (See links below)		Yes
2 - Have you reviewed the US Secretary of State's web site and the Center for Disease Control (CDC) web site for Travel Warnings regarding Health and Safety factors? (See links below)		Yes
3- If you plan to handle animals or visit farm or animal facilities, have you contacted the Institutional Animal Care and Use Committee (IACUC) web site regarding such activities and acknowledge your personal responsibility to comply with the guidelines, policies and procedures as outlined on that web site and the personal consequences of failure to comply? (See links below)		
SPARCS	US Secretary of State	CDC
		Homeland Security
		IACUC
Compliance Officer for Integrity, Objectivity and Security in SPARCS		

Signature by the traveler indicates that he/she certifies that the information provided in this request is true and accurate and acknowledges that reimbursement is subject to university travel policy and for the documented service/benefit to the University.

Traveler Certification (Signature/Date):
JoJo Lue Jenkins

For Department Use Only

If for a student, are state appropriated funds being committed for this travel authorization?	Yes
If yes, the travel must be at the the department's request for "Official State Business" as defined in PRR REG 07.65.03 and not for activities supported by student activity funds, athletic program funds, student auxiliary funds, study abroad funds, contract and grant funds, student fund-raising activity funds, or activities that constitute a personal benefit to the student such as travel for an academic/course requirement not covered by an approved special fee deposited in State funds. Please select the reason for committing State funds from the following drop down box:	
[Click to select the reason for committing State funds from this drop down box:]	
Department Comments:	
Department Head Approval (Name/ Signature /Date): (When travel is for a student and State funds are committed, the Department Head must approve directly and may not delegate authorization responsibility.)	

Accounting Information: (Project(s) and Percentage must be completed)			Trip #	
Project(s) to be charged:				
Percentage	100.00%			
Amount	3,391.98	0.00	0.00	0.00