# Research Grant Travel Expense Authorization Form

## Researcher Information

Full Name:

Department:

Email:

Grant Name/Number:

## Travel Details

Destination:

Purpose of Travel:

Departure Date:

Return Date:

## Estimated Expenses

| Expense Category | Description | Estimated Amount |
|---|---|---|
| Transportation | | |
| Accommodation | | |
| Meals | | |
| Registration Fees | | |
| Other | | |

Total Estimated Expenses:

## Justification for Travel

Explain how this travel aligns with your research objectives and the grant requirements.

Researcher Signature:

Date:

## Approval

Authorized Approver Name:

Signature:

Date:

## Important Notes

- Authorization must be obtained **prior** to travel.
- All expenses must comply with grant regulations and institutional policies.
- Receipts and detailed documentation are required for reimbursement.
- Unapproved or ineligible expenses may not be reimbursed.
- For questions, contact your department's grants administrator.