North Carolina Department of Public Safety
Travel Authorization

Date _____ ◯ Individual Request ◯ Group Request Number in Group _____ Funded By _____

Section A. General Information *(Type or Print)* **Note:** *Enter **WORK** address/phone below.*

Name _____ _____ *(Personnel No.)* _____ *(Job Title)*

Address _____

City _____ State **NC** Zip Code _____ _____ *(Division)* _____ *(Section)*

Phone _____ E-mail Address _____

Section B. Action Requested

Travel Dates Begin _____ End _____

General ☐ Travel Reimbursement ☐ Blanket **Travel Type** Normal Business Travel

☐ Other _____

Transportation ☐ State Car ☐ Private Vehicle *(Management Approval Required)* ☐ Airline ☐ Other

Section C. Travel Costs

◯ In-State Travel ◯ Out-of-State Travel ◯ Out-of-Country Travel ☐ Excess Lodging _____

Expenses	Number of Days	Number of People	Rate In-State	Rate Out-of-State	Total
Breakfast			$8.30	$8.30	
Lunch			$10.90	$10.90	
Dinner			$18.70	$21.30	
Hotel			$67.30	$79.50	

State car available? ◯ No (.575/mi.) ◯ Yes (.30/mi.)

Private Vehicle Mileage	Miles			.30 or .575	
Parking Fees and Tolls			Registration		
Airline		Baggage			
Other					
Total Estimated Travel Expenditures					

Amount next to excess lodging is for approved excess rate per night. If another # is used, adjust the "Total" hotel cost in the table to the left, and explain below.

Additional Comments/Justification

Section D. Approval Signatures

NOTES: (1) Original signatures and dates are required for advance to be issued; (2) Complete and submit this form at least **2 weeks prior to** the event. If the request includes air travel, approval must be requested **30 days prior to** travel dates.

Section / Location Head _____ *(Printed/Typed Name)* _____ *(Signature)* _____ *(Date)*

Phone _____ E-mail Address _____

	Printed/Typed Name	Signature	Date
Division Head (Out-of-State)			
Secretary of Public Safety (Out-of-Country)			

Form CNTR 001 Travel Authorization Form
Form structure revised July 2015
NC Department of Public Safety, Division of Administration

Print Form