



BUSINESS TRAVEL AUTHORIZATION REQUEST FORM

NO OF DOCUMENT _____ TYPE _____ YEAR _____

The undersigned _____

In the capacity of: employee of the University of Trento
 external / affiliated staff

requests

to authorize a business travel to _____

Period from _____ to _____

for the following purpose *: _____

*All the supporting documents (proof of stay, invitation letters, brochures and other) related to the business travel shall be submitted along with the business travel reimbursement request
Please specify below the purpose of the business travel and, in case of business travel of technical and administrative employees, the name of the training course, conference or seminar:

1FZ Title of the event _____

The trip will be undertaken with the use of:

- a business vehicle (University vehicle)
- an ordinary means of transportation (airplane, train, bus, private vehicle for distances under 700 km)

For private vehicle: model _____ license plate _____

an extraordinary means of transportation:

- private vehicle for distances above 700 km

For private vehicle: model _____ license plate _____

- rental vehicle

- taxi

The use of extraordinary transportation means, with reference to Regulations Art.7, Chapter 4, is necessary for: _____

Is requesting in addition an authorization to make an intermediary stop-over in _____

Which is necessary for the following purpose _____

Whenever the business travel requires a usage of private vehicle, the undersigned declares that the University of Trento will have no liability arising from the use of such vehicle.

The undersigned also declares the conformity with the norms and regulations related to this form.

The undersigned declares to have been informed that the personal data contained in this form are to be stored in the paper-based and electronic archives of the University of Trento and will be used only for business purposes of the institution. This is also to declare that I have received the information stipulated by the Art.13 of the Legislative Decree no 196 as of 30 June 2003 (Personal Data Protection Code).

Date _____

Signature _____



UNIVERSITÀ DEGLI STUDI
DI TRENTO

PART RESERVED TO THE HEAD OF THE COST MANAGEMENT CENTER

Administrative Presidium

The cost is assigned to the Project/Cost Center

Fund

Management Center (SAP code)

Approval: authorized

Fund Manager

Date _____
