

BREWSTER ACADEMY

Travel Authorization Worksheet

Name: _____

Department: _____

Where are you going: _____

What is the purpose of your trip? _____

Date of Departure: _____ Date of Return: _____

<u>Category</u>	<u>Estimated Cost</u>
_____ Air _____ Train _____ Other	_____
Rental Vehicle _____ Yes _____ No _____ # of Days	_____
Lodging: Number of Nights _____	_____
Meals: _____ Breakfast _____ Lunch _____ Dinner	_____
Misc Transport (e.g. cab, tips, baggage fees.)	_____
Hosting an event (provide a brief description): _____	_____
_____	_____
_____	_____
_____	_____

Total Estimated Cost: _____

<u>Account #</u>	<u>Account Name</u>
_____	_____

Requestor's Signature Requestor's Name Date _____

Manager's Signature Manager's Name Date _____

* Please return to **Business Office** once form is completed. Thank You.