Required Approval Form for Travel/Flight Accommodations
Center for Theoretical Biological Physics
Rice University

TRAVELER INFORMATION

First Name: ____________________________ Middle Name: ____________________________

Last Name: ____________________________ Date of Birth: ____________________________

Home/Cell Phone #: ____________________________ Business Phone #: ____________________________

Email Address: __________________________________________________________________________

Dates of Travel: __________________________________________________________________________

EVENT REGISTRATION

This event HAS “early-bird” registration fee? YES or NO (circle one)

AIRFARE (REMEMBER - Purchase or Reimbursement of airfare MUST be on U.S. Carrier ONLY)

• Airfare To Be Paid: □ By Traveler (Out of Pocket – To Be Reimbursed) - OR - □ Paid by CTBP
  □ No Airfare Needed (Local Event)
• Traveler has read and understands the CTBP Travel & Per Diem Policy? Circle one: YES or NO (ASK for COPY if needed)
• Traveler has received (PRIOR to PURCHASE) FINAL approval from either Louise Miller or Lisa Bennett? Circle one: YES or NO
• Lodging
  □ I am a graduate student and I will be sharing a room with ________________________________.
  □ I am a postdoc

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Business Purpose of Travel: Must include name of event, event dates, location and reason for attending
(ex. “to participate in name of event”, or “present a talk/poster at the name of event”, etc.)

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PI/Faculty Name: ____________________________ PI/Faculty Signature*: ____________________________

* We must have a faculty signature, prior to making the reservation.

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CTBP Administrative Use Only: Charge to Fund/ORG: ____________________________