

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:** _____
Required for airfare purchase made by CTBP Staff

Home/Cell Phone #: _____ **Business Phone #:** _____

Email Address: _____

Dates of Travel: _____

EVENT REGISTRATION

Does this event have "early-bird" registration fee? YES or NO (*circle one*)

Is this event LOCAL (no airfare needed)? YES or NO (*circle one*)

AIRFARE (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 - by CTBP
- Traveler has read and understands the CTBP Travel & Per Diem Policy? (*ask for copy if needed*)
YES or NO (*circle one*)
- Traveler has received (*prior to purchase*) final approval from:
 Colleen Morimoto Kimberly M'Carver Margie Dieter Gaby Paramo
- Lodging
 I am a graduate student and I will be sharing a room with _____.
 I am a postdoc.

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.)

PI/Faculty Name: _____ **PI/Faculty Signature*:** _____

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

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