

I. Business Travel Authorization Form

(Please submit this form in **duplicate**, a **photocopy** suffices.)

	From the supervisor to the approving entity / Human Resources department	Important: Due to insurance purposes , the business travel authorization form needs to be submitted well in advance of the business trip!
1	<input type="checkbox"/> Business trip with reimbursement of travel expenses	<input type="checkbox"/> Business trip without reimbursement of travel expenses
2	Last name, First name	Home address E-mail
3	Chair/Department	Telephone Remuneration bracket
4	Travel destination Please take note of the information on business travels to other countries and on related social security matters available on our homepage (A1 certificate).	
5	In case of a business trip to another country: The Federal Foreign Office has <u>not</u> issued a travel warning for this country or a particular region of the country (http://auswaertiges-amt.de). I will follow given safety advice. I will make sure to be informed of the current security status before and during my trip. As soon as a travel warning for the country or a particular region of the country is issued, I will inform my superior in order to plan my immediate return.	
6	Purpose of business trip (Please name a reason for your trip and <u>always</u> attach invitations and programs.)	
7	Fellow colleagues traveling with you (Please submit separate business travel authorization forms.)	
8	Beginning of business trip / absence	Business
	Year	Start Expected end Expected end of business trip / absence
	Day / Month Time From	Day / Month Time Day /Month Time Day / Month Time To
		<input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/>
		<input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/>
		<input type="checkbox"/> Yes <input type="checkbox"/> No
9	Is the business trip in any way associated with private holiday travel ? <input type="checkbox"/> No <input type="checkbox"/> Yes From _____ to _____	
10	Planned means of transport: <input type="checkbox"/> Train <input type="checkbox"/> 1st class <input type="checkbox"/> 2nd class <input type="checkbox"/> I own a Bahncard (BC): <input type="checkbox"/> BC 25 <input type="checkbox"/> BC 50 <input type="checkbox"/> BC 100 <input type="checkbox"/> 1st class <input type="checkbox"/> 2nd class <input type="checkbox"/> Job-Ticket <input type="checkbox"/> Other public transport (e. g. bus, tram) <input type="checkbox"/> Airplane (Please name reasons for travel ing by plane within Germany or to neighboring countries.): <input type="checkbox"/> Private vehicle <input type="checkbox"/> No reason in particular <input type="checkbox"/> Reason/s (Please check the appropriate box/es.) <input type="checkbox"/> Travel with colleagues (Please name fellow travelers.) <input type="checkbox"/> Travel destination cannot be reached by means of public transport <input type="checkbox"/> Severely disabled <input type="checkbox"/> Other reasons: <input type="checkbox"/> I will travel by car with <input type="checkbox"/> Official vehicle <input type="checkbox"/> Bike <input type="checkbox"/> Rental car / Taxi (Please name a reason.):	
11	I receive external funds and/or allowance <input type="checkbox"/> Yes <input type="checkbox"/> No I receive a honorarium <input type="checkbox"/> Yes <input type="checkbox"/> No External funds and free board and lodging will count against travel expense allowances. I will list these details on the travel expense report. I hereby confirm the accuracy of the information given above.	_____ Date / Signature of applicant

II. Approval by the President, dean, professor, director

The requested business trip is approved. <input type="checkbox"/> Reimbursement of eligible costs according to the Act on Travel Expenses of the Land of Baden-Württemberg (LRKG) or other directives. The purpose of the the trip is solely related to business. <input type="checkbox"/> _____ % reimbursement of eligible costs according to the LRKG or other directives (e.g. congresses, seminars, lectures). <input type="checkbox"/> Max. reimbursement of _____ € <input type="checkbox"/> No reimbursement of travel costs Reimbursement from:					
<table border="1" style="margin: auto;"> <tr> <th style="width: 50%;">Kostenstelle / PSP-Element (10 digits)</th> <th style="width: 50%;">Funds (4 digits)</th> </tr> <tr> <td style="height: 20px;"> </td> <td> </td> </tr> </table>	Kostenstelle / PSP-Element (10 digits)	Funds (4 digits)			_____ Date / Signature of President / Vice President / dean / professor
Kostenstelle / PSP-Element (10 digits)	Funds (4 digits)				

III. Authorization subject to the following specifications set by the university administration

<input type="checkbox"/> Reimbursement of travel costs according to the LRKG or other directives as external funds were granted. <input type="checkbox"/> _____ % reimbursement <input type="checkbox"/> Grant of _____ € <input type="checkbox"/> No reimbursement <input type="checkbox"/> Reimbursement according to the following specifications: <input type="checkbox"/> Only transport costs will be reimbursed <input type="checkbox"/> Means of transport as requested with the following restrictions: <input type="checkbox"/> Only / No daily allowance Train <input type="checkbox"/> 1st class <input type="checkbox"/> 2nd class <input type="checkbox"/> Bahncard <input type="checkbox"/> Only / No allowance for overnight stay <input type="checkbox"/> Max. reimbursement amounts to the costs of the most inexpensive ticket <input type="checkbox"/> Reimbursement from/to office Private vehicle: Reasons <input type="checkbox"/> Approved <input type="checkbox"/> Not approved <input type="checkbox"/> Reimbursement is to be claimed Airplane <input type="checkbox"/> Economy class with the organizers of the event. <input type="checkbox"/> Business trip is not approved! Reasons: _____	
_____ Date / Signature	