

SECTION A – GENERAL INFORMATION

Applicant Name					
School/Directorate			Purpose of travel		
Departure Date		Return Date		Number of nights away from home	
Travel Destination (list main country)			Complete Itinerary FBT Estimator to calculate the business versus private days		
Are you academic teaching staff?	Yes	No	Will your teaching need to be covered?	Yes	No
				Will sessional staff be required to cover your teaching?	Yes No

SECTION B – JUSTIFICATION

Please state how this application aligns with your PRDP Key Objectives	
Please state intended outcomes for the University from proposed funding	
Submission date for Report on Outcomes (Academic only) Submit to supervisor within one month of return, outlining the achievement of objective(s) and intended application.	

SECTION C – TRAVEL BUDGET

Expense Type	Details	Estimate Amount		
Airfares	Request, via email to Campus Travel, quote with visa cost (if required). <i>NB. Your quote will automatically be loaded by 10% to allow for price increase.</i>			
Accommodation	Calculate expenses based on number of nights at destination(s) and include any hotel special rates (if) available from conference / event convener.			
Conference / Event fee	Attach copy of conference / event flyer to this application			
Meals	Refer ATO Reasonable Daily Allowance Do not include meals included in conference / event registration.			
Incidentals	Laundry / tipping / parking etc			
Transit costs	Shuttle bus / taxis / train etc			
Teaching buy-out	If sessional staff are required to cover teaching please contact Coordinator, School Services to obtain costing.			
Funding Source				
Source	Dept / Project name	Department code	Project code	Amount
FedUni funds				
FedUni funds				
FedUni funds				
Private / External funds	N/A	N/A	N/A	
NB. Airfare estimate has been loaded by 10% to allow for price increase.				Total FedUni funds being requested

SECTION D – TRAVEL CHECKLIST

Flights & Transits

If you have researched specific flight times/carriers, please provide flight numbers and dates.

Please list full name(s) of any additional travellers accompanying you, if applicable (for student cohorts please complete table on next page)

Please state if you have a flight seating preference.

If you need to be seated with colleague(s) please quote their Concur Request ID.

Please state any dietary requirements for flights.

Please state if you require an approximate arrival time at your destination.

Do you require airport pickup at your destination?

Are you likely to have excess baggage?

Do you require an airport shuttle bus booking (to/from Melbourne)?
NB. Please contact your area's administration to arrange.

Do you require car hire?
NB. For security reasons charges will be applied to your personal credit card.

Accommodation

Provide any key event venue address(s) to source convenient hotel locations.

Please state if you have hotel room requirements?

If there are special hotel rates available for any event attendance where bookable direct with the hotel (not via conf. online registration), please list the hotel name, special rate and any booking codes.

Event attendance

Do you require online payment to be made for event registration?
If Yes, please contact your area's administration.

Passport & Visa (International only)

State your full name as identified on your passport

Are you travelling on an Australian passport?
If No, please state which country.

List all countries to which you are travelling.

Does your passport have 6-months validity from date of re-entry into Australia?


If a Visa application is required do you have passport photos ready?

SECTION E – RISK MANAGEMENT

Do you have a pre-existing health condition, which may be impacted by you travelling?	Yes	No
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If Yes, please obtain a medical certificate from your practitioner stating you are fit for travel?

SECTION F – DOCUMENT CHECKLIST

For all attachments use the  icon in left hand toolbar to attach within this application

Campus Travel airfare quote	Conference or Event Flyer (if applic.)
Completed Itinerary FBT Estimator	Official conference presenter acceptance (if applic.)
Report on Outcomes from last funded travel	Teaching buy-out costing (if applic.)
(Fit for travel) Medical Certificate (if applic.)	

SECTION G - APPROVAL

Supervisor Name

Approved

Not Approved

Signed by Supervisor

Dean / Director / DVC / COO / VC
(approving Financial Delegate)

FedUni Funding
Approved Amount

Approved

Not Approved

Signed by Financial Delegate

TO BE COMPLETED FOR STUDENT STUDY TOURS

Student name (state full name)

Student ID