


SECTION A – GENERAL INFORMATION				
Applicant Name (seeking funding)		Traveller Name (if non-staff Guest)		
School/Directorate		Purpose of travel		
Are you academic teaching staff?	Yes	No	Is sessional staff required to cover teaching?	Yes No
Are you an HDR student?	Yes	No	Has your Supervisor given provisional approval to proceed?	Yes No
PRELIMINARY DETERMINATIONS (complete only when travelling)				
Travel Calculator & Diary completed (mandatory)		% of Private Days (as stated on Travel Calculator & Diary) %		
Departure Date	Return Date	Number of nights away from home		
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) & intended application.				
SECTION C – TRAVEL BUDGET				
EXPENSE	DETAILS			COST ESTIMATE
Airfares	Request, via email to FCM Travel, quote with visa cost (if required). NB. Your quote entered will be loaded by 10% to allow for price increase.			
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 (use as a guide only) 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				
Private / External funds	N/A	N/A	N/A	
NB. Airfare estimate has been loaded by 10% to allow for price increase			Total requested FedUni funds	
SECTION D – DOCUMENT CHECKLIST				
For all attachments use the  icon in left hand toolbar to attach within this application before signing				
Completed Travel Diary & Calculator		Official conference presenter acceptance (if applic.)		
(Fit for travel) Medical Certificate (if applic.)		Conference or Event Flyer (if applic.)		

SECTION E – RISK MANAGEMENT DECLARATION (complete only when travelling)

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

SUBMIT APPLICATION TO YOUR DEAN / DIRECTOR / PVC / DVC

SECTION F - APPROVAL
PART 1 - PRELIMINARY CHECKS

Travel Calculator & Diary sighted as complete and within threshold (Refer attachment)

Has Supervisor given provisional approval? (Refer Section A)

PART 2 – FINAL APPROVAL

Approved	Not Approved	FedUni Funding Approved Amount
Dean / Director / PVC / DVC		