

Exception to Travel Request

This form is to be completed and approved prior to submitting a Concur travel request and before travel arrangements are made.

The approved form must be attached to the Concur travel request and to the Concur report.

TRIP INFORMATION

Traveler Name:

Travel Destination:

Trip Purpose:

Travel Start Date:

Travel End Date:

Trip Type: i.e. (conference, meeting)

Funding Source:

Reason for Travel:

Method of Travel:

TRAVELER CERTIFICATION: I have carefully weighed the risks involved. I certify that the travel complies with the state and local regulations in place at the destination of travel, as well as along the travel route, including guidance in the areas of face coverings, mass gatherings, and social distancing. I have reviewed and understand the CDC recommendations.

I understand that it is expected that I carefully document my route and location throughout the duration of my trip in case contact tracing becomes necessary.

Traveler Signature:

Date:

DEAN/ATHLETIC DIRECTOR/VICE PRESIDENT APPROVAL:

Dean/ /Vice President/Athletic Director Name:

Date:

(PLEASE PRINT)

Dean/ /Vice President/Athletic Director Signature: