

P.O. Box 2 Green Bank, WV 24944-0002 304.456.2011	NATIONAL RADIO ASTRONOMY OBSERVATORY Associated Universities, Inc  TRAVEL AUTHORIZATION FORM	Date Received by Reservationist:
520 Edgemont Road Charlottesville, VA 22903-2475 434.296.0211		Date Prepared:
P.O. Box O Socorro, NM 87801-0387 505.835.7000		Account to be charged: (Required)
Santiago Office Apoquindo 3650, piso 18 Las Condes, 7550108 Santiago, Chile		Employee Number: (Required)

Name of Traveler	NRAO Telephone Number
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Itinerary: *(Include personal travel associated with this trip)*

Purpose of Trip: *(Be concise concerning activities planned and their relationship to approved programs or objectives.)*

<i>Period of Business Travel</i>	Begin on or About:	End On or About:	<i>Period of Vacation Travel</i>	Begin on or About:	End on or About:
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TRAVEL CONCERNS:	AUTHORIZATION FOR:
<input type="checkbox"/> Observatory Business <input type="checkbox"/> Seminar or Training <input type="checkbox"/> Moving <input type="checkbox"/> Personnel Interview <input type="checkbox"/> Scientific or Professional Meeting <input type="checkbox"/> Observing Run / Data Reduction <input type="checkbox"/> International Travel (see Note 1) <input type="checkbox"/> High Altitude Physical	<input type="checkbox"/> Use of Private Automobile - Observatory's convenience <input type="checkbox"/> Use of Private Automobile - Employee's convenience <input type="checkbox"/> Use of Rental Car (compact) <input type="checkbox"/> Use of Commercial Flight <input type="checkbox"/> Other:

Note
Does Traveler have a cash or transportation advance outstanding, or balance due AUI? (If answer is "Yes", authorization must be signed by an Assistant Director.)

Yes No

TRAVEL ADVANCE REQUEST	SIGNATURES
A cash advance of \$ _____ is required by _____ <i>(one week in advance of travel.)</i>	Traveler
If advance is required earlier give explanation	Approval (Division Head)
	Approval (Assistant Director)
	Approval (Director)