UNIVERSITY OF GHANA

EXTERNAL TRAVEL REQUEST FORM

1. Name of applicant……..……..

2. Position……

3. Department/Unit…….…….……

4. Faculty/College/Directorate……..……..……

5. Purpose of travel (Please tick as appropriate) : Official / Private / Mix of both.

6. If official, please provide the following details (*Attach supporting documents where necessary*):

   a. Activity (eg. conference, study tour)……

   b. Theme of the activity……

   c. Location of activity……

   d. Role to be played……...

   e. Costs to be borne by the University of Ghana (Please indicate as appropriate)

      i. Airfare: .....….....

      ii. Per diem allowance . .....

      iii. Conference/Seminar fees …….....

      iv. Other (Please specify). .....

7. Country to be visited .....

8. Proposed date of departure……..……...…

9. Proposed date of return……..

10. Indicate what arrangements have been made for work to be done in your absence

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11. Signature of applicant…….Date……

12. **Recommendation of Head/Immediate Supervisor**

12a. Indicate whether there are funds in your budget to cover the costs to be borne by the University (attach confirmation note from the Budget Office, if available)

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12b. Indicate what outstanding duties the applicant has to perform, if any

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Recommended …… Not Recommended ……

Name……....…… Designation ……..……..……

Signature……..……. Date …….……...

13. **Decision by Dean/Provost/Registrar/Vice-Chancellor**

Approved …… Not Approved ……

Name……....…… Designation ……..……..……

Signature……..……. Date …….……...