Travel Cash Advance Form

☐ Complete this form in order to receive a cash advance or to have funds encumbered “reserved” for trip expenses.

☐ Incomplete forms will be returned.
Departments should assign a unique number to each cash advance form, and keep a log of numbers used.

Recommended that the number should consist of 2 letters and 3 numbers. (XX123)

This is crucial to tracking the process of transactions.

Multiple requests for the same trip for an individual should use the same Trip Number followed by sequential alpha numbering. (XX123A)
## CA - Individual’s Information

**INDIVIDUAL INFORMATION**

<table>
<thead>
<tr>
<th>Individual's University Status (Employee or Student)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Southeast ID or SSN</td>
<td></td>
</tr>
<tr>
<td>First Name</td>
<td>Last Name</td>
</tr>
<tr>
<td>Address</td>
<td>City</td>
</tr>
<tr>
<td>Department</td>
<td>Office Phone</td>
</tr>
<tr>
<td>Mailstop</td>
<td></td>
</tr>
</tbody>
</table>

- **Individual’s University Status** – Is the individual requesting the Advance an Employee or a Student?
- **Southeast ID or SSN** – Individual’s Southeast ID number or Social Security number (Southeast ID preferred)
- **Name** – Individual’s First & Last Name, Middle Initial optional.
- **Address** – Individual’s home address.
- **Department** – Dept. that the individual works for, or the dept. that is responsible for the individual’s trip.
- **Office Phone** – Campus Extension of a contact person if there are any questions about the advance.
- **Mailstop** – Submitting Department’s mailstop.
CA – Travel Information

<table>
<thead>
<tr>
<th>TRAVEL INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Purpose of Travel</td>
</tr>
<tr>
<td>Location / Destination</td>
</tr>
<tr>
<td>Other Attendees (if Group Travel)</td>
</tr>
</tbody>
</table>

- **Purpose of Travel** – The business purpose of the trip (i.e., name of conference, no acronyms)
- **Departure Date** – Date the individual is leaving for trip.
- **Location / Destination** – City and State destination
- **Return Date** – Date returning to campus/home.
- **Other Attendees (if Group Travel)** – If trip qualifies as Group Travel, list the names of the attendees that the funds are also covering expenses for. If there is insufficient space to list names, provide the person count and status (i.e., 20 students and 2 staff) and attach a list of the names to the back of the form.
CA - Estimated Expenses

**ESTIMATEDEXPENSES**

<table>
<thead>
<tr>
<th>Miles</th>
<th>Mileage Rate</th>
<th>To be Paid by Individual</th>
<th>Paid Directly by University</th>
<th>Total Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>0.37</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

- **Paid Directly by Individual** - Per expense breakdown of what will be paid “out of pocket” by the individual.
- **Paid Directly by University** - Per expense breakdown of what the University will cut a check for.
  - Not to be paid by the individual.
- **Total Expenses** – form calculates to give a grand total of the trips full estimated cost.
CA - Budget information

- **Index** – Index Code of budget that estimated expenses should be encumbered from and cash advance charged to.
  - Multiple lines for splitting estimated expenses between more than one budget if needed.
- **Account** – Account Code for the trip expenses. (drop down list available)
- **Amount** – Dollar amount of estimated expenses to be encumbered for the designated budget.
CA - “Cash” Request

☐ **100% Advance Request** – If request qualifies for a 100% Cash Advance, select the type of qualification.

☐ **Cash Advance Amount** – Dollar amount being requested
  - 75% for Individual travel (Employee)
  - 100% for Student, Group, or Prepayment
By signing this form, the Individual hereby grants the University permission to deduct from his/her paycheck the portion of any cash advance not accounted for within 30 days after the end of the month in which the travel was completed.

In addition per Policy - .....No further travel advances will be permitted until the travel advance is cleared and may result in the loss of future advance privileges.

☐ Individual’s Signature – Required
☐ Notice – By signing this form, the Individual hereby grants the University permission to deduct from his/her paycheck the portion of any cash advance not accounted for within 30 days after the end of the month in which the travel was completed.

☐ In addition per Policy - .....No further travel advances will be permitted until the travel advance is cleared and may result in the loss of future advance privileges.
CA - Authorization Signatures

**APPROVAL SIGNATURES**

<table>
<thead>
<tr>
<th>Supervisor</th>
<th>Date</th>
<th>Financial Manager</th>
<th>Date</th>
<th>Other Approval</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Printed Name</td>
<td></td>
<td>Printed Name</td>
<td></td>
<td>Printed Name</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Grant Accountant</th>
<th>Date</th>
<th>Other Approval</th>
<th>Date</th>
<th>Other Approval</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Printed Name</td>
<td></td>
<td>Printed Name</td>
<td></td>
<td>Printed Name</td>
<td></td>
</tr>
</tbody>
</table>

- **Supervisor Approval** – Required
- **Financial Manager Approval** – Required (if different than Supervisor)
- **Grant Accountant** – Required if Advance funds are being requested from a Grant Budget
- **Other Approvals** – Any additional signatures required.
- Out of Country Travel requires VP/Provost level approval
- *FYI – Provost requires Dean’s signature*
CA – Special Comments

☐ Space is available at the bottom of the form for any special comments that need to be made.

☐ Example:
  ■ Additional names for Group travel that did not fit in upper section.
CA - Form Buttons

- Function Buttons are located at the top left side of the form.
- **Reset Form** – to clear and reset all form fields of any information previously entered.
- **Print** – Use button to print the form.

**Saving a Copy of the Form** – There is not a save function for this form. A physical or scanned copy of the form should be made by the Individual / Department after all required signatures are on the form.