

Travel Approval Delegation Form

PROCEDURE

The Travel Approval Delegation Form is used to delegate authority to approve travel authorization and related expense claims on behalf of the President. The employee who has been delegated authority will review and comply with the limits and policies identified in this form.

Recommendations for standard delegation amounts are as follows:

1. Department/Division Heads: Delegation up to \$4,999
2. Vice Presidents: Delegation from \$5,000 - \$9,999
3. President: \$10,000 and above to be approved by the President

INSTRUCTIONS



Download this form to your desktop **and** open the form in **ADOBE PDF** before starting. **This form will NOT work correctly in your web-browser.**



Make sure the 'Show border hover color for fields' in Adobe PDF is 'checked'. You will only need to complete this requirement if you have altered the default settings of Adobe PDF on your computer.



Mandatory fields are highlighted in '**RED**'.



Use a **Digital Id Signature** when signing this Form.



Click the '**RED**' button to stop the routing of this document, and identify why you stopped the routing of this document.



Click the '**GREEN**' button to send this document to the next reviewer.

CALENDAR

Today's Date:

Employee to whom authority is delegated

Name:

Department/Division:

LC State E-mail:

Telephone No:

Warrior ID:

Authorized Uses

Travel Authorization and Travel Expense Claim approval

Maximum Authorized Limit:

I have read, will comply with, and will ensure the travelers that I approve have read and will comply with, the following policies and procedures:

LC State travel policy 4.101 at <https://www.lcsc.edu/policies>.

LC State Travel Procedures Manual at <https://www.lcsc.edu/controllers-office/travel>.

Idaho State Travel policy and Procedures at <https://www.sco.idaho.gov/LivePages/state-travel-policy-and-procedures.aspx>

I verify that I will review all related travel expenses, determine expenses are reasonable and necessary prior to approval, and will reconcile expenses to receipts and travel authorization.

I verify that I will retain records of all department/division-level approved no-cost and student travel, in accordance with LCSC Record Retention Policy 4.103 at <https://www.lcsc.edu/policies>.

ROUTING & APPROVALS

Note: The preparer of this document is responsible for identifying all needed e-mail address. Please do not 'Print to PDF' or send a scanned copy of the Travel Approval Delegation form.

Signatory/Approver	LC State E-mail	Digital ID Signature	Action	
			Disapprove	Approve
Department/Division head:				
President:				