

Pre-authorization

All travel must be authorized in advance in compliance with the one-over-one approval" principle using the "Application for Faculty/Employee Travel Form" (Appendix A and B)

Advances

The University may provide a maximum of one (1) travel advance per trip up to 75% of the total cost of the trip, but of no less than \$500 and no more than \$2,000 when:

- Travel will be to a remote location where credit cards have limited application
- The nature of expenditures are unlikely to be chargeable to a credit card
- The trip is lengthy which precludes being reimbursed for the requested portion of the advance before credit card charges can be paid
- The student or staff member lacks credit card eligibility or the required cash resources
- Costs of the trip cannot be pre-paid using the University credit card or the University's travel agent.

Travel advance requests must be submitted to your supervisor in compliance with the "one-over-one approval" principle for approval prior to forwarding to financial services for payment. Travel advance requests must include complete supporting documentation.

University employees are required to submit a travel expense claim form within two weeks of return from travel. The travel expense claim form must include reference to the advance received, and include a copy of the travel advance approval form.



Reimbursement

Within 2 week of return from a trip, Faculty/Employees are required to complete the "University Travel Expense Claim" form (Appendix C) along with the following documentation and information:

- Travel Authorization Form
- Travel advance request Form, if an advance was issued
- Receipts supporting all expenditures
- Dollar breakdown of accountable advances, amounts prepaid, amount paid via
 University credit card, and resulting amount outstanding to be paid to the traveler
- General ledger account coding

The amount paid by the traveler must be clearly indicated on the documentation, and any applicable taxes broken out. Any amounts claimed in a foreign currency must be converted to CDN dollars and support provided for the rate of exchange used. *Note: Visa receipts alone are not considered sufficient documentation to support your claim.*

University Travel Expense Claim forms must be signed by the traveler as well as the appropriate supervisor in compliance with the "one-over-one approval" principle.

Further Reference

Travel, Hospitality & Business Expenditures Policy & Procedures

Purchasing Policy & Procedures



Appendix A

APPLI	CATION FO	R FACULT	TY TRAVI	EL			
Last name:		First name:					
Rank:		Department: Phone Ext.					
REASON FOR TRAVEL: (Indic Department Business	ate which of the followin	g)					
Research							
Conference Paper/Poster (Title) Panel Representative Other							
Attach any additional information	you have regarding your	reason for travel (i.e.,	Conference Brochu	re)			
DETAILS: Destination	1	act Mary Box 1					
Dates for Travel							
How many classes will be miss	ed?						
What provisions have been made to cover your classes and other							
Do you have a University Blackb Traveling outside of Canada? You <i>must</i> arrange for Roaming Tra - Roaming includes: Data (email, so	vel Plans through Help Desk	prior to leaving the coun g on the phone), Text M	try. essages.	. 4			
COSTS (e.g. per diem, taxi, etc)		TRANSPORTATION (air fare economy)					
		Registration Fee:					
		Costs:					
		TOTAL:	,				
SOURCE OF FUNDING	ACCOUNT#	FUNDS REQUESTED	ADVANCE REQUESTED	ADVANCE AMOUNT			
□ TPDA		\$	□ YES □ NO	\$			
☐ Research/Travel Account		\$	□ YES □ NO	\$			
☐ Other (specify)		\$	□ YES □ NO	\$			
If an advance against TPDA is request If an advance against a research, trave	ed, please forward this form to l or other account is requested	o the Vice-President (Acad d, please forward this form	emic) Office, 3C21 n to the Financial Servi	ces Office – Rice Bldg			
Signature of Applicant:	A - LANGUE	-					
I approve of the travel and provis	ions made to cover classe	es					
Department Chair:		Date: _					
Dean/University Librarian:	-	Date: _					

Link: http://www.uwinnipeg.ca/financial-services/docs/travel-app-faculty.doc



Appendix B

APPLICATION FOR EMPLOYEE TRAVEL Return completed form to your Supervisor for final approval					
PLOCOCOCO	DATE:				
Last name:		First name:			
Department:		Phone Ext.			
REASON FOR TRAVEL: (Indicate whi	ch of the followin	g)			
Department Business					
Conference (Title)					
Attach any additional information you have	regarding your reas	on for travel (i.e., Conference Brochure)			
DETAILS:					
Destination					
Dates for Travel					
COSTS (e.g. per diem, taxi, etc)		TRANSPORTATION (air fare economy)			
		Registration Fee:			
		Costs:			
		TOTAL:			
Source of Funding? Account N	umber:				
Advance Requested? ☐ No	□ Yes	(If Yes, specify amount)			
Do you have a University Blackberr Traveling outside of Canada?	y/iPhone?				
You must arrange for Roaming Travel P	lans through Help	Desk prior to leaving the country.			
- Roaming includes: Data (email, surfin	g the web), Voice	(talking on the phone), Text Messages.			
Signature of Applicant;		Date:			
orginature of Applicant,		Date.			
I approve of the travel					
Area Supervisor:		Date:			
05/17/13					

 $\textbf{Link:} \ \ \textbf{http://www.uwinnipeg.ca/financial-services/docs/Application-for-Employee-Travel-October-16-2014.doc$



Appendix C

THE UNIVERSITY OF WINNIPEG					UNIVERSITY TRAVEL EXPENSE CLAIN For expenses incurred while traveling on University business (see Page Two for instructions)			
Name:			Department:					
Purpose of Travel / Relating to: Destination:			Dates of Travel:					
ACCOUNT DE SCRIPTION	ACCOUNT#	TRAVEL DETALS		SUBTOTAL	G8T	PST	TOTAL A-0	
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ideJ								
leals/Per Die m				FI	NANCE USE ON LY		Enter Here	
ther Transportation								
ther Travel								
Auto Mile age and Total Kilometers Trave	ed (INFORMATION IS ENTERS	ED ON PAGE 2)						
Mileage - General - Other Transportation Mileage - Prof Dev - Other Transportation	75120 75220							
TO TAL TRA VEL EX PENDITURES:					* Can hair	on Rana Ona (%)	f addition al lines a re require	
	TO BE COMPLETED BY CLA		, —					
undina Sources:	TO BE COMPLETED BY CLA	Sub-Derit	I COO DOCD A	NEGUINEI D TRA VEL EXPENDITU	D TO BE COMPLETE			
Departmentalt Department Nan	ne Dept (4 Dig	jts) (4 Digits) Amount (\$	LESS AMOUN	TS PAID DIRECTLY BY FINANCIAL SERVICES B				
De pertmen te i De pertmen te i			LEGG AMOUN	ITS PAID BY FINANCE ITS PAID BY CLAIMAN				
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Awards: Award Name	Award (6 D		TOTAL AMOU	NTRETURNED				
Awards Awards			Note: 1	Please in dicate which ex				
			-1	with the corresponding			e. of the many life.	
TO TAL FUNDING:			3	Cost Alboation	n - To Be Completed	by Fire no is 18er	vioes:	
hereby certify that the above is a correct st		University business	Assount	Department 8	Bub-Department	Award	Amount(\$)	
and has not been or will not be reimbursed f	-							
Claimant's Bignature:		Date:						
Authorizing Bignature:								
Note: Authorizing signature must be the to the Claimant								

Link: http://www.uwinnipeg.ca/financial-services/docs/WEB-Travel-Expense-Claim-NEW.xlsx