

PMI Travel Request Authorization Form

Department of Pathology, Microbiology and Immunology

VUMC

PMI Pre-Travel Request Authorization

Resize font:



Please complete the survey below.

Thank you!

PATHOLOGY, MICROBIOLOGY and IMMUNOLOGY Travel Pre-Authorization Form

Please complete all fields on the pre-authorization form. When your travel has been authorized, a copy of the completed form will be returned to you and your departmental expense report approver.

Travel pre-authorization is required of all travelers who are traveling on Vanderbilt business. Please complete and submit this form. Please review the responsibilities of the traveler when traveling using Vanderbilt funds.

Please note - ALL faculty and staff must use Concur to book travel. You will not be reimbursed if you book travel outside the Concur system. As of July 2014, P-cards will no longer be used for payment of travel expenses such as airfare, hotel rooms, etc. The new travel tool will require ALL faculty and staff to create your own profile in Concur and all travel expenses will be reimbursed through Concur.

Submit this request to your division chief no later than one month prior to requested travel.

First Name

* must provide value

Pradeep

Last Name

* must provide value

Srivastava

Email

* must provide value

pradeep.srivastava@vumc.org

Select Category

* must provide value

Departure Date

* must provide value

 Today M-D-Y

Return Date

* must provide value

 Today M-D-Y

Foreign Travel on Federal Fund?

* must provide value

- Yes
 No

reset

Trip to/Location: For travel in the US, include city and

Foreign Travel on Federal Fund?

* must provide value

- Yes
 No

reset

Trip to/Location: For travel in the US, include city and state. For international travel, indicate city and country.

* must provide value

Expand

Business Purpose/Justification

* must provide value

Expand

Please Upload Any Supporting Documentation

[Upload document](#)

Estimated cost

* must provide value

How many Centers to charge?

Proposed Center Number to Charge

* must provide value

N/A if no institutional funds used

Center 1 Proportion (Percentage or \$ Amount)

* must provide value

Signature-Traveler:

(I hereby request authorization to travel on behalf of Vanderbilt University Medical Center (VUMC). I have read and understand the [VUMC travel policies](#) as well as any more specific or restrictive policies established in department or division. I understand that my travel expenses must be submitted within 60 days after I return from this trip.)

* must provide value

Submit

Save & Return Later

Which Category & Home Division Do I Select?

- Faculty should select “Faculty” and the appropriate division. The approval mapping will be prepopulated.
- Research staff should select “Staff” and “Other” as their Home divisions. You will then be prompted to enter the email address of your PI/Mentor.
- Clinical staff should select “Staff/Residents” and “Other” as their home divisions. You will then be prompted to enter the email address of your supervisor.
- Research Postdocs should select “Students/Postdocs” and will then be prompted to enter the email address of your PI/Mentor.
- Clinical Fellows should select “Clinical Fellow” and then the appropriate division. The approval mapping will be prepopulated.
- Residents should select “Staff/Residents” and “Education” as their home division.
- CHTN Staff should select “Staff/Residents” and “CHTN”. The approval mapping will be prepopulated.
- This process does not apply to VU Students. They will continue with their current process with the BRET office.

FACULTY/CLINICAL FELLOW/STAFF

(must select division)

Approval Process:

Step 1: Foreign Travel on Federal Funds

Yes → Admin Officer: Candice Stevens

No → Bypass Step 1

Step 2: Division Chief (AA(s) will also receive email) (see slide 8)

Step 3: Department Chair (Assistant to Chair will also receive email)

Step 4: Traveler and AA(s) for the division will receive a copy of the approved travel form via email

Step 5: AA saves form to shared drive

Step 2: Division Chief/PI/Supervisor Approval

You will receive an email alerting you that a request is ready for your review. The link in the email will take you to this page. You should be able to approve from a computer, phone or tablet.

1. Check the box indicating request has been reviewed
2. Approve/Deny the request
3. Submit

* must provide value	<input type="text"/>	Expand
Business Purpose/Justification * must provide value	Mountaineering	Expand
Please Upload Any Supporting Documentation	+ Upload document	
Estimated cost * must provide value	1000000	
How many Centers to charge?	1 ▼	
Proposed Center Number to Charge * must provide value	45646464646	N/A if no institutional funds used
Center 1 Proportion (Percentage or \$ Amount) * must provide value	100	
Signature-Traveler: (I hereby request authorization to travel on behalf of Vanderbilt University Medical Center (VUMC). I have read and understand the VUMC travel policies as well as any more specific or restrictive policies established in department or division. I understand that my travel expenses must be submitted within 60 days after I return from this trip.) * must provide value	PS	
(Division Chief) I have reviewed the details of this travel request	<input checked="" type="checkbox"/>	
Division Chief Approval of Travel:	<input type="radio"/> Approve <input type="radio"/> Deny	reset
<input type="button" value="Submit"/>		
<input type="button" value="Save & Return Later"/>		

STAFF (OTHER)/STUDENTS/POSTDOCS

(must provide email address for their supervisor/PI)

Approval Process:

Step 1: Foreign Travel on Federal Funds

Yes → Admin Officer: Candice Stevens

No → Bypass Step 1

Step 2: Supervisor/PI

Step 3: Department Chair (Assistant to Chair will also receive email)

Step 4: Traveler will receive a copy of the approved travel form via email

Email Approval



Srivastava, Pradeep

Stevens, Candice L

Travel Request Approved



Srivastava_2018-08-01_PS App.pdf
45 KB

FYI

Your travel request has been approved. Please retain a copy of this approval for your records and to submit with Concur Expense Reports to get reimbursements.

Thank you,

PMI Travel

PMI Pre-Travel Request Authorization

Please complete the survey below.

Thank you!

Response was added on 08/01/2018 3:40pm.

PATHOLOGY, MICROBIOLOGY and IMMUNOLOGY
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Submit this request to your division chief no later than one month prior to requested travel.

First Name	Pradeep
Last Name	Srivastava
Email	pradeep.srivastava@vumc.org
Select Category	<input type="radio"/> Faculty <input checked="" type="radio"/> Staff <input type="radio"/> Students/Postdocs
Home Division	<input type="radio"/> PMI Administration <input type="radio"/> CHTN <input checked="" type="radio"/> Education <input type="radio"/> Other
Departure Date	08-01-2018
Return Date	08-01-2018
Foreign Travel on Federal Fund?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Trip to/Location: For travel in the US, include city and state. For international travel, indicate city and country.	PS: App
Business Purpose/Justification	Jlm: App

Please Upload Any Supporting Documentation

Estimated cost	45464
How many Centers to charge?	<input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
Proposed Center Number to Charge (N/A if no institutional funds used)	65464646
Center 1 Proportion (Percentage or \$ Amount)	46464
Signature-Traveler: (I hereby request authorization to travel on behalf of Vanderbilt University Medical Center (VUMC). I have read and understand the VUMC travel policies as well as any more specific or restrictive policies established in department or division. I understand that my travel expenses must be submitted within 60 days after I return from this trip.)	PS
(Admin Officer)I have reviewed the details of this travel request	<input type="checkbox"/>
(Supervisor/PI/Mentor)I have reviewed the details of this travel request	<input type="checkbox"/>
(Division Chief)I have reviewed the details of this travel request	<input checked="" type="checkbox"/>
Division Chief Approval of Travel:	<input checked="" type="radio"/> Approve <input type="radio"/> Deny
(Department Chair)I have reviewed the details of this travel request	<input checked="" type="checkbox"/>
Department Chair Approval of Travel:	<input checked="" type="radio"/> Approve <input type="radio"/> Deny

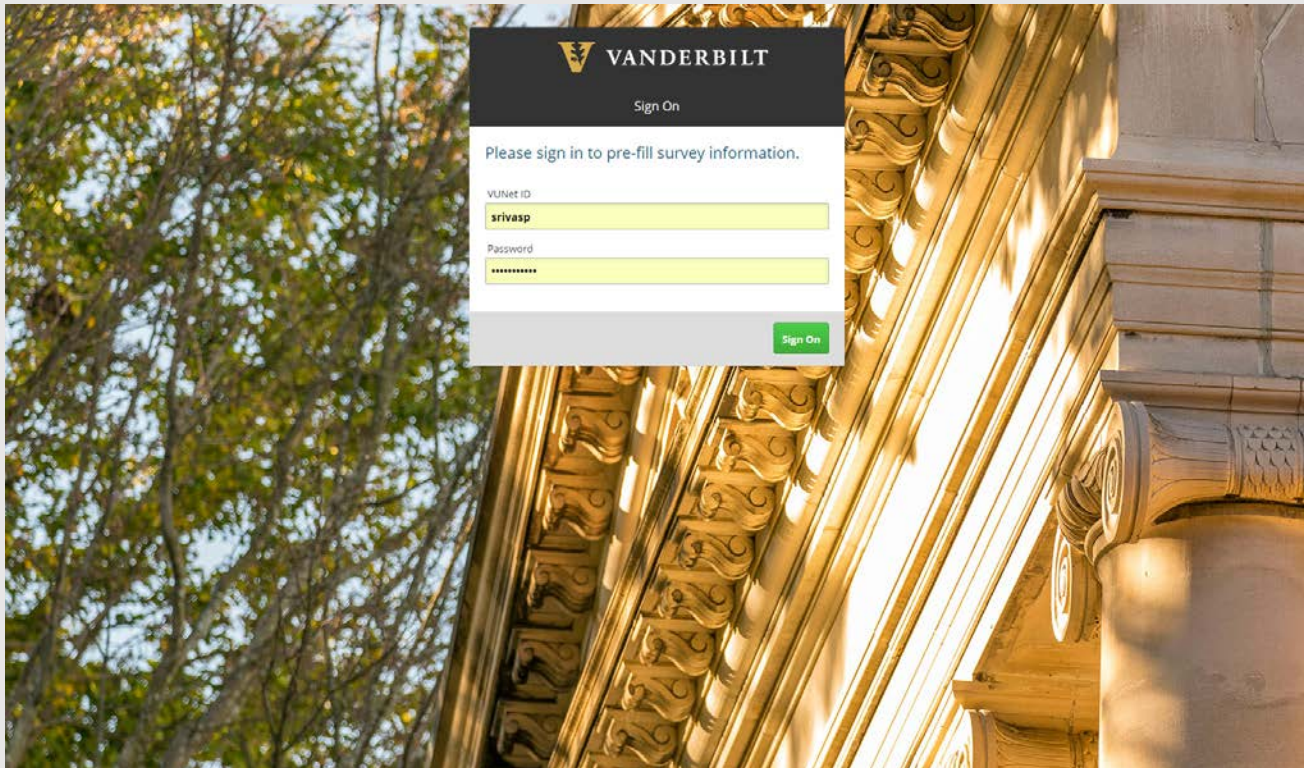
Division	Division Chief	Administrative Assistant(s)
Anatomic Pathology	Alice Coogan	Donna Posey Zeon Sayni Nancy Selah Pam Serna
Hematopathology	Adam Seegmiller	Holly Spann
Laboratory Medicine	Adam Seegmiller	Ondrea Simmons Pam Serna Zeon Sayni
Molecular Pathogenesis	Eric Skaar	Starr Hollyfield
Neuropathology	Ty Abel	Shawn Johnson
Renal Pathology	Agnes Fogo	Kimberly Rampersad
PMI Administration	Martha Miers	Mikael Byrd
CHTN	Kerry Wiles	Tiarra Draper
Education	Robert Hoffman	Tapherine Devany Katherine Sachs

*Staff (other)/Students/Postdocs will enter the email address of the mentor/supervisor who will approve as “Division Chief”. No AA will receive notification.

AAs can submit form on behalf of the traveler.

Login with your credentials:

<https://redcap.vanderbilt.edu/surveys/?s=C9H3WJJRLP>



Change
First name
Last Name
and Email
with traveler's
before
submitting

Submit this request to your division chief no later than one month prior to requested travel.

First Name * must provide value	<input type="text" value="Pradeep"/>
Last Name * must provide value	<input type="text" value="Srivastava"/>
Email * must provide value	<input type="text" value="pradeep.srivastava@vumc.org"/>
Select Category * must provide value	<input type="text" value="Faculty"/>
Home Division * must provide value	<input type="text"/>
Departure Date * must provide value	<input type="text" value="08-07-2018"/> <input type="button" value="Today"/> M-D-Y
Return Date * must provide value	<input type="text" value="08-07-2018"/> <input type="button" value="Today"/> M-D-Y
Foreign Travel on Federal Fund? * must provide value	<input checked="" type="radio"/> Yes <input type="radio"/> No reset
Trip to/Location: For travel in the US, include city and state. For international travel, indicate city and country. * must provide value	<input type="text"/> Expand
Business Purpose/Justification * must provide value	<input type="text"/> Expand
Please Upload Any Supporting Documentation	<input type="button" value="Upload document"/>
Estimated cost	<input type="text"/>