

Air Travel Authorization (ATA)



TEXAS WOMAN'S
UNIVERSITY™

This form should be filled out and signed by the Traveler and the Account Approver. It should then be routed to the Travel Coordinator in Procurement and Contract Services by the 20th of the month with the Air Card Reconciliation and Expense Report.

TRAVELER INFORMATION (to be filled out by Traveler or Card Administrator)

Traveler Status:

Employee

Prospective Employee

Other*: _____

*Must provide additional documentation to Procurement Services

Traveler Name _____

Traveler's Phoenix Supplier
Contact Procurement Office for Assistance

Traveler Department _____

INFORMATION IF TRAVELER IS NOT A CURRENT UNIVERSITY EMPLOYEE (to be filled out by Card Administrator)

Street Address: _____

City: _____

State: _____ Zip Code: _____

FLIGHT INFORMATION (to be filled out by Traveler or Card Administrator)

Airfare: One-Way Round-Trip

Destination: _____ Dates of Travel: _____

Travel Purpose: _____

TRAVELER AND DEPARTMENTAL APPROVAL

Traveler Signature _____

Date _____

Account Number to be Charged _____

Account Approver Name (Printed) _____

Account Approver Signature _____

Date _____

Research & Sponsored Programs Name (Printed)
(FOR GRANT ACCOUNTS ONLY)

Research & Sponsored Programs Signature _____

Date _____