

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