



Lincoln Center for the Performing Arts

EMPLOYEE TRAVEL AUTHORIZATION FORM

INSTRUCTIONS:

1. Complete all required fields on this form
2. Send to designated signees for approval ☐

REQUIRED SIGNATURES:

Employee traveling, Department Manager, and Chief Operating Officer

No domestic or international travel will be approved unless this form is signed by all three required parties

Booking must be completed at least two weeks prior to departure date

This signed form must be re-submitted with any travel reimbursement requests

Questions? Concerns? Please contact your department manager for further assistance.



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2) Send to designated signees for approval
REQUIRED SIGNATURES: Employee Traveling, Department Manager & Chief Operating Officer)
All travel must be approved by Dept. Mgr. and COO at least **two weeks prior to trip.**
This signed form must be re-submitted with any travel reimbursement requests.

*Employee Name:	_____	*Date Completed:	_____
*Email Address:	_____		
*Phone:	_____		
*Manager Name:	_____		
*Department:	_____		
*Project:			
*Reason for Travel:			

*Departure Date	*Return Date	*List all destination(s) during travel; Hotel, Flight, and/or rental car (if applicable)	*Estimated Cost

**Use additional page if more space is needed*

Employee (Required Signature)
Traveler
Date

Manager Signature (Required Signature)
Date

Liza Parker (Required Signature)
Chief Operating Officer
Date