

UNIVERSITY OF ULSTER

**APPLICATION FOR APPROVAL OF PROPOSED EXPENDITURE
ON A VISIT OR COURSE OF STUDY**

NAME :

Claim No.

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Contact Address/RoomNumber (including school & faculty where applicable)

Staff No.

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.....

Contact Number Telephone/Extension.....

Place of visit/course

.....

Purpose of Visit/Course

Duration of visit/course: FROM 20 TO 20

Estimated Cost:

£ p

Course Fee

Subsistence

Air/Boat Travel.....

Coach /Taxi.....

Rail Travel

Sundries (please specify).....

Total

Cost Centre

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IF THE TOTAL IS £1000 OR MORE A BUSINESS CASE IS REQUIRED

Signed Applicant Date

I recommend the approval of this application

..... Dean/Head of Department

For use by Finance Officer

Claim No.

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To :

DESIGNATION

Your application for proposed expenditure on a visit / course from 20
to 20 has been considered and the amount provisionally

approved is £ Receipts as appropriate must be attached to final claim.

Date:20 Signed: