

**Ulster University**  
**Budget Approval Form For Field Trip/Vacation Course**

Claim Number

Group Leader \_\_\_\_\_ Staff Number         e        

Course \_\_\_\_\_

Place of Visit/Course \_\_\_\_\_

Description of visit \_\_\_\_\_

Duration           From \_\_\_\_\_ To \_\_\_\_\_ (inclusive)

Number of Staff            Number of Students

**Estimated Costs**

	Air Travel _____
Subsistence & Accommodation (staff & students)	_____
Transport Costs	_____
Car and Minibus Hire	_____
Taxi Fares	_____
Cost of Car Mileage (if applicable)	_____
Sundries	_____
Total Cost of Field Trip	_____
Less Student Contribution	_____
<b>Net Cost to School</b>	<b>=====</b>

Cost Centre \_\_\_\_\_

**Faculty Approval**

Approved \_\_\_\_\_ Dean

\_\_\_\_\_ HOS if research code is issued

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**For Finance Use Only**

Amount	Date Paid	
_____	_____	
_____	_____	
_____	_____	
_____	_____	
Total		<input style="width: 60px; height: 20px;" type="text"/>