Applica Please submit this application to the appropria		val of Business T val (Sec. 4.2 of the Busi	
Personnel Office – I A – Head of the following department / centra	al institute / cent	ral service:	
Project manager (person responsible for the	university account	t) of the following proje	ct or spokesperson of the following CRC:
I request approval for the following business	travel:		
Without reimbursement for travel exp	enses	Г	P
With reimbursement for travel expension	ses		Received: stamp
With travel expense allowance funde	d through:		
External funding Budgetary resources of the dep (including financial incentives for prof appointment funding etc)	essors/ for manager	ment by objectives and	
 Resources for academic and sc provided by the department/cer Resources provided by the univ Central research commission fu 	ntral institute versity`s Internat	-	
I. Personal information:			
Last name, first name	mployee ID number	Type of employment at Freie Universität:	
		Civil servant (Be	amter/Beamtin) Salary group:
Position or title phone no. (home)	phone no. (work)	Employee (Ange	stellte/Angestellter) Comp. group:
Department / central service / central institute / central univers	sity admin. unit		
Institute			hnempfänger/in) Wage group:
Institute address		Student assistan	t/tutor
Home address		Other relationship with Freie Universität:	
II. Information on business travel:		(e.g., teaching ass	ignment, private employment agreement, etc.)
	_		
Conference Research	Partner	rship	Field trip Other
Travel destination:			
Purpose of travel: Reason for business activity (please be sure to fill	out) Examples:	event / research project / p	partnership project, etc. or \rightarrow
→ Other			
Event organizer: (Please attach invitations / programmes / confirmation	of acceptance of p	roposed presentation or ta	lk)
Business traveler's role or function (during the even	t):		
Traveler's own academic / scientific contribution	: 🗌 Yes	□ No	
Where applicable, author sequence and topic of	presentation / lec	cture:	
Planned start of travel / departure from Berlin:	Date:		Time:
Start of travel from another location:			
Beginning of business activities at the business	location: Da	te:	Time:
Estimated end of business activities at the busir	ess location: Da	.te:	Time:
End of return travel / arrival in Berlin:	Da	te:	Time:
End of return travel to another location:			
Will the business travel be associated with any v □ No □ Yes ► Please list vacation end:	n destination, whe		start, and
I expect to receive external contributions:		□ No	
□ Yes, lump sum of €			— lunch — dinner ► (Please strike through where
 Yes, free accommodations Yes, allowance for incidentals of € 	per dia		ement for participation fees not applicable) ist)
External funding has been applied for (e.g., w/ E		\square Yes, with	

Application for Approval of Business Travel – Page 1 – 11/06 -— Continue to page 2 —

—2—	
 I intend to travel as follows: Via regularly scheduled modes of transportation With my privately owned vehicle, license No.: As a passenger in the vehicle of	hicle 🔄 By plane
Use of ☐ the privately owned vehicle ☐ air travel ☐ business-related interests. ► Reasons why this	I is in I my own interest is necessary:
III. Cost estimate (please fill out for all travel for which you are really a second s	russting on allowance):
Mode of transportation: — Rail — Air — Use of privately owned vehic	
(Vehicle owner:/ share of costs) Ticke	et price: €
Conference fees: The following charges are included:	
Incidentals (payments made and received, etc.) €	
Applicant's bank account details: Acct. No.:	Routing No.:
Financial institution:	
IV. Statement on courses:	
□ No courses affected □ No teaching obligation	Classes not in session
 If courses fall within the period during which you will be absent, pleased 	
separate attachment with thi	s application. —
V. Statement on ancillary activities or other employment:	
The business activities in which I will be engaging are associated with se	econdary employment Yes 🗌 No 📋
<u> </u>	
Date Signature of b	ousiness traveler (for Sections I through V)
VI. Opinion of institute / department head / supervisor:	
The travel applied for: is necessary for business rea	sons I is approved the proposed absence during this business travel.
The travel applied for: There are are no business-related reasons against	sons is approved the proposed absence during this business travel. Signature
The travel applied for: There are are no business-related reasons against	the proposed absence during this business travel. Signature
The travel applied for: There are are no business-related reasons against Date	the proposed absence during this business travel. Signature
The travel applied for: is necessary for business real There are are no business-related reasons against business-related reasons against Date	the proposed absence during this business travel. Signature
The travel applied for: is necessary for business real There are are no business-related reasons against business-related reasons against Date	the proposed absence during this business travel. Signature
The travel applied for: is necessary for business rea There are are no business-related reasons against Date VII. Opinion of the department/central institute/central service/oth	the proposed absence during this business travel. Signature ner employment site/project manager:
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The travel applied for:	the proposed absence during this business travel. Signature ner employment site/project manager:) / ing: project number) / finance item / university account
The travel applied for: is necessary for business real There are no business-related reasons against to Date VII. Opinion of the department/central institute/central service/oth Reasons >> This travel is necessary for the following reasons: (Detailed reasons are required. Please enclose a detailed statement if applicable. Additional travel participants:	the proposed absence during this business travel. Signature ner employment site/project manager: / / / / / / / / / / / / / / / / / /
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The travel applied for: There are are no business-related reasons against in Date VII. Opinion of the department/central institute/central service/oth Reasons >> This travel is necessary for the following reasons: (Detailed reasons are required. Please enclose a detailed statement if applicable. Additional travel participants: Travel financed by means of:	the proposed absence during this business travel. Signature ner employment site/project manager: / / / / / / / / / / / / / / / / / /
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Appendix to Business Travel Application dated:

Courses during Business Travel

Last name, first na	me:		
Department / Cent	ral Service / Central Institute:		
Institute:			
Travel to (place):			
	Start date:	End date:	

The following courses fall within the period during which I will be absent:

Course No.:	Course title	Course date

The course(s)

will be made up as follows:

Date: _____ Time: _____

Date: _____ Time: _____

Date: _____ Time: _____

Date: _____ Time: _____

will be held by a substitute

Name of substitute

Date and signature of substitute