

ISS/STUDY ABROAD GROUP TRAVEL REQUEST FOR ONE TIME POLICY EXCEPTION

Program Leader _____ Date Requested _____

Travel Authorization # _____ Dates of Travel _____

Destination(s) _____ Department _____

ISSUE: _____

CURRENT POLICY: Policy# _____

POLICY EXCEPTION REQUESTED: _____

EFFORTS TO COMPLY WITH POLICY: _____

EXCEPTION REQUEST JUSTIFICATION: _____

COMPENSATING FACTORS OR CONTROLS: _____

RISK OF NOT FOLLOWING POLICY (including estimated costs): _____

REQUIRED SIGNATURES:

Program Leader Signature	<i>I certify that the above statements are true. I have read and understand the University's Travel Policies.</i>	Date
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To be completed by the International Student Services/Study Abroad Director		
Comments:		
Signature	<i>I have reviewed the University Travel Policy with the above employee.</i>	Date

To be completed by UW Parkside Travel Services		
Comments:		
Signature	<i>I have reviewed the University Travel Policy with the above employee.</i>	Date

To be completed by the Vice Chancellor for Finance & Administration		
Comments:		
<input type="checkbox"/> Exception Approved	<input type="checkbox"/> Exception denied	
Signature	Date	

Please attach additional documentation deemed appropriate. This signed and dated Policy Exception Form must be included with E reimbursement request or Purchasing Card Log, as applicable. The ISS/Study Abroad office must retain a copy of signed exceptions and make them available upon request from Internal Audit.