

**Please note:** The travel expense report needs to be filed no later than **6 months** after the business trip acc. to the LRKG.  
**Only expenses incurred for your own business trip are reimbursable.**

 I have an authorized application for travel approval; a copy must be attached

 External (no attachment necessary)

<b>Last name, first name:</b>			<b>Chair/Department:</b>				<b>Digital Application number:</b>
1	<b>Departure</b>		From <input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> _____ (other)	<b>Itinerary</b> (please list destinations)	<b>Business</b>		<b>Daily return?</b> <input type="checkbox"/> Yes  (Please indicate your daily itinerary, if necessary, in a separate attachment)  <input type="checkbox"/> No
	Day/Month/Year	Time			Start	End	
				Day/Month/Time	Day/Month/Time		
	<b>Return</b>		To <input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> _____ (other)				
	Day/Month/Year	Time					
<b>For international travel: Please indicate times of boarder crossings in local time</b>							
2	from (country)*	to (country)*	Departure from (airport)	Destination (airport)	Time of boarder crossing, in case of air travel indicate arrival time		
					Day/Month/Year	Time	
<b>The department accounted for (please attach relevant documents, e.g. AirPlus bill):</b>							
3	<input type="checkbox"/> Advance to myself	_____ €	<input type="checkbox"/> Air travel expenses	_____ €	<input type="checkbox"/> Rail travel expenses	_____ €	
	<input type="checkbox"/> Attendance fees	_____ €	<input type="checkbox"/> Accommodation	_____ €	<input type="checkbox"/> _____	_____ €	(other)
<b>I accounted for (please attach relevant receipts and proof of payments):</b>							
4	<input type="checkbox"/> Bus/Tram	_____ €	<input type="checkbox"/> Train	_____ €	<input type="checkbox"/> Other means of transport	_____ €	
	<input type="checkbox"/> Taxi	_____ €	<input type="checkbox"/> Air travel	_____ €	<input type="checkbox"/> Internet fees (for business purposes)	_____ €	
	<input type="checkbox"/> Attendance fees	_____ €	<input type="checkbox"/> Hotel	_____ €	<input type="checkbox"/> _____	_____ €	(other)
<b>Reasons for taxi costs must be indicated. Reasons:</b>							
<input type="checkbox"/> Destination could not be/was difficult to reach by means of public transport <input type="checkbox"/> It was essential to save time due to urgent business activities or appointments <input type="checkbox"/> Public transport was unacceptable due to heavy luggage (such as files) <input type="checkbox"/> Other reasons – please indicate:							
<b>Details regarding transportation:</b>							
5	<input type="checkbox"/> Bike/E-Bike/Pedelec _____ km (round trip)						
	<input type="checkbox"/> Official vehicle	<input type="checkbox"/> Carpool in the vehicle of _____					
	<input type="checkbox"/> Rental car _____ €						
	Please make sure to always indicate: The rental car was used for private purposes to _____ %.						
	Reasons for the use: _____						
<b>Further details regarding transportation</b>							
<input type="checkbox"/> Personal vehicle _____ km (round trip)							
<input type="checkbox"/> Not in the university's interest							
<input type="checkbox"/> In the university's interest (please check as applicable):							
<input type="checkbox"/> Carpool with colleagues (please indicate names, reimbursement only if they have submitted applications for approval)							
<input type="checkbox"/> Important business appointments before or after the business trip							
<input type="checkbox"/> Travel destination cannot/can only with difficulty be reached with regular means of public transport such as train/bus/tram (please attach proof)							
<input type="checkbox"/> Degree of disability of at least 50							
<input type="checkbox"/> Using the vehicle saves a significant amount of time							
<b>Please attach a printed copy of the route planner</b>							
<b>6 External funding (monetary or in-kind) and private contributions that may count against travel expense reimbursements</b>							
6.1	Free board, including in air travel expenses, attendance fees, and hotel bills		<input type="checkbox"/> Breakfast times on _____	<input type="checkbox"/> Lunch times on _____	<input type="checkbox"/> Dinner times on _____		
	6.2	Accommodation	complimentary	<input type="checkbox"/> included in attendance fees			from/to _____
		other	<input type="checkbox"/> covered by the organizers			from/to _____	
			<input type="checkbox"/> private accommodation (with claim to accommodation lump sum)			from/to _____	
			<input type="checkbox"/> private accommodation (with claim to accommodation lump sum)			from/to _____	
			<input type="checkbox"/> overnight stay in airplane/public transport			from/to _____	
6.3	Honorarium		<input type="checkbox"/> Yes _____ €	thereof destined for travel expenses: _____ €		<input type="checkbox"/> Reimbursement to myself	
						<input type="checkbox"/> Reimbursement to chair/department	
6.4	Other external funding/other reimbursements, e.g. from foundations		<input type="checkbox"/> Reimbursement to myself (please indicate amount in EUR, type of reimbursement, and source)				
			<input type="checkbox"/> Reimbursement to chair/department (please indicate amount in EUR, type of reimbursement, and source)				
7	<input type="checkbox"/> <b>Application for increase of accommodation reimbursement (reason for choice of accommodation):</b>					<b>Further notes:</b>	
	<input type="checkbox"/> Conference hotel, attendance of meetings, and networking with other participants <input type="checkbox"/> Increased hotel rates due to trade fair taking place at destination city <input type="checkbox"/> Despite efforts (3 inquiries) cheaper rates were not available in the area <input type="checkbox"/> Other reasons (please indicate):						
8	<b>Bank transfer to:</b>			<b>BIC:</b>			
	IBAN: _____ (22 digits for German bank accounts) Please make sure to always indicate your bank details, even if any payments have already been made!						
9	I hereby confirm the <u>accuracy</u> and the <u>completeness</u> of the information provided above. I have indicated any external funding received.					<b>Confirmation of factual accuracy</b> <i>sachlich richtig</i>	
	Date	Signature of applicant			Signature, title/remuneration bracket		