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| State of South Carolina |
| Comptroller General’s Office |
| Approval of Foreign Travel |

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|  |  |
|  | Agency Number |

## NOTE: Any foreign travel of a State Employee requires prior approval of the Comptroller General. Therefore, please complete the form below and submit to the Comptroller General’s Office at least 14 calendar days prior to travel. This request may be submitted to Ronnie Head ([rhead@cg.sc.gov](mailto:rhead@cg.sc.gov)) or Jennifer Hairston ([jhairston@cg.sc.gov](mailto:jhairston@cg.sc.gov)).

**Signature of this form, represents that the employees will use the most economical mode of travel (no first class airline tickets and consideration given to hotel and meal expenses)**

**Once approved, please attach to travel document.**

**Please call 803-734-2540 for questions**

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| Name: |  | | | |  |  | |  |
| Last | | | | First | MI | |  |
| ZEMP #: |  | | | | | | |  |  | |  | | | |  |
| Official Headquarters: | | |  | | | | |  |  | | | | | | |
|  | | | |  | | | |  |  | | | | | | |
|  | |  | | | | | |  | Dates | | |  | Times | | |
| Destination From: | |  | | | | | |  |  | | |  |  |  | |
| To: | |  | | | | | |  |  | | |  |  | |  |
| Return From: | |  | | | | | |  |  | | |  |  |  | |
| To: | |  | | | | | |  |  | | |  |  |  | |
| Purpose of Trip: | |  | | | | | | | | | | | |  | |
|  | |  | | | | | | | | | | | |  | |
| Approved By: | | | | | | | | | | | | | | | |
|  | | | | | | |  | | |  | | | | | |
| (Signature of Agency Head) | | | | | | |  | | | Date | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | |  | | |  | | | | | |
| (Signature Traveler) | | | | | | |  | | | Date | | | | | |

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**(Approval of Comptroller General’s Office) Date**

**Please provide a return Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Approval of Foreign Travel Form**