

Waiver Request Form
The University of Mississippi

This form is to be used to request a Waiver from any of the standard travel procedures set forth in the Office of Purchasing and Travel, Travel Manual. The request should be submitted to Procurement Services **prior to** making any reservations or commitments.

Date: _____ Department: _____

Name of Traveler: _____ Phone: _____

Traveler's E-Mail Address: _____

Travel Date(s): _____

Destination(s): _____

Purpose of Travel: _____

Amount of Reimbursement Requested: _____

- _____ Requesting authority to pay an amount greater than state contract
- _____ Requesting authority to rent a vehicle with a cost greater than the intermediate size on state contract
- _____ Requesting authority to purchase vehicle rental insurance
- _____ Requesting authority to rent a vehicle not on current contract
- _____ Requesting authority to pay a hotel other than the conference hotel
- _____ Requesting authority to pay greater than the least expensive cost comparison for airline tickets
- _____ Other

Please explain your request. Include any and all information which would prove that approval of the Waiver would be economical and in the best interest of the state and/or the approval of the Waiver is necessary for some other reason. Failure to provide adequate information will be cause for delays and potentially the rejection of the request (attach additional pages if needed). We must be able to determine the anticipated cost to the state and any anticipated savings. **You must include all applicable cost information (example: cost comparisons showing savings, conference hotel rate vs. actual rate paid, etc.).**

Departmental Approval _____
Department Head Date

Approved: _____
Procurement Services Date