Annex 1

ASSIGNMENT AUTHORIZATION

I, the undersigned ____________________________ requires the authorization to travel to ____________________________ to participate in ____________________________.
________________________________________________________________________

Means of transport to be used:
• Airplane;
• Train;
• Own car*;
• Other

Duration in days: _______ from (please specify date and time) __________________________
to (please specify date and time) __________________________.
All costs will be covered by (please, specify funds) __________________________ managed by
Professor/Doctor __________________________.

Date __________________________

Signature __________________________ Fund manager __________________________

Approved by the
Head of Department __________________________
(Prof. Ernesto TOMA)

(*) Please fill in the authorization form for the use of own car.