GT Human Resources

RELOCATION AUTHORIZATION FORM

Faculty/Staff Member: _____

Dept. Name: _____

Position Title: _____

Hiring Manager: _____

HR Contact Name: _____

HR Contact Phone: _____

Spouse Name: _____

Dept. Contact: _____

Dept. Contact Phone: _____

PeopleSoft Budget Number (if applicable): _____

Is the entire move capped? _____ If Yes, what is the cap amount? _____

Is storage authorized? _____ If Yes, how many days are authorized? _____

Place an "X" in each box that applies

Funding Source	**House Hunting**	**Moving Co HHG Pack/Ship**	**Self-Move**	**Mileage**	**Airfare**	**Estimated Cost**	**Taxable or Non-Taxable**
Department State Funds *Note: Specific, maximum reimbursement limits **must** be included in the written offer of employment to be paid via State funds.*							
Georgia Tech Foundation Funds (GTF)							

NOTE: The Office of the Provost will support the actual costs for moving household goods of new tenured/tenure track faculty members.

RELOCATION BENEFITS AUTHORIZED

Household Goods Move: Authorized: _____ Cap, if applicable: _____

Employee Origin Address

Street: _____ Apt: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Employee Destination Address

Street: _____ Apt: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

RELOCATION AUTHORIZATION FORM

Professional Goods Move: Authorized: _____ Cap, if applicable: _____

Professional Goods Origin Address

Street: _____ Apt: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Professional Goods Destination Address

Street: _____ Apt: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Home Marketing Services (no Armstrong fee): Recommending realtors at origin who will help price, market, monitor, negotiate and facilitate closing.

Authorized: _____

Home Finding Services (no Armstrong fee): Recommending realtors at destination who will help price, market, monitor, negotiate and facilitate closing.

Authorized: _____

Mortgage Services (no Armstrong fee): Taking the faculty/staff member's application over the phone and providing a convenient, cost effective option through an approved national lender.

Authorized: _____

Temporary Living Services (no Armstrong fee): Providing temporary housing with Armstrong's reduced rates at more than 400,000 apartments in more than 2,000 U.S. cities.

Authorized: _____

Special Instructions/Comments:

APPROVAL

Budget Code #1: _____
Budget Code #2: _____
Hire Date: _____

Unit Financial Officer	_____	Title	_____	Date	_____
Manager	_____	Title	_____	Date	_____
OHR/FA	_____	Title	_____	Date	_____
Next Level Supervisor	_____	Title	_____	Date	_____
Additional Approvals	_____	Title	_____	Date	_____

Any exception requests to this policy must be approved by the President, Executive Vice President for Administration & Finance, or Provost and Executive Vice President for Academic Affairs or their designees.