

GENERAL FUND TRAINING: REQUEST FORM

COMPLETE THIS FORM AND SEND IT TO THE HUMAN RESOURCES OFFICE WITH DOCUMENTATION OF THE PROPOSED TRAINING. A COPY OF THE APPROVED TRAINING REQUEST WILL BE SENT TO YOU.

SCHOOL / SEMINAR: _____

PROGRAM SPONSOR: _____

LOCATION: _____ DATE(S): _____

EMPLOYEE(S) ATTENDING: _____

WAS THIS TRAINING REQUEST APPROVED IN THE CURRENT GENERAL FUND TRAINING BUDGET? YES NO

ITEM DESCRIPTION	AMOUNT PER PERSON	TOTAL AMOUNT	PAYMENT METHOD
REGISTRATION AND FEES			
_____ _____ <input type="checkbox"/> I'm registering myself/my staff <input type="checkbox"/> I'd like HR to register me/my staff			<input type="checkbox"/> Travel advance filed <input type="checkbox"/> Paid by employee for reimbursement <input type="checkbox"/> Separate claim paid in advance by HR <input type="checkbox"/> Bill to Human Resources Office
TRANSPORTATION			
<input type="checkbox"/> Personal vehicle: _____ miles at reimbursement rate of _____¢ per mile <input type="checkbox"/> Common carrier: _____ <input type="checkbox"/> Rental vehicle: _____ (Requires pre-approval of Auditor) <input type="checkbox"/> Ground transportation: _____			<input type="checkbox"/> Travel advance filed <input type="checkbox"/> Paid by employee for reimbursement <input type="checkbox"/> Separate claim paid in advance by HR <input type="checkbox"/> Bill to Human Resources Office
MEALS, LODGING & OTHER ANTICIPATED EXPENSES			
Per diem: _____ days at \$_____ per day. • In-state = \$7B / \$8L / \$15D. Out-of state = \$10B / \$15L / \$25D • Indicate meals provided and do not include in this total Lodging: _____ room(s) for _____ night(s) at \$_____ per room/night			<input type="checkbox"/> Travel advance filed <input type="checkbox"/> Paid by employee for reimbursement <input type="checkbox"/> Separate claim paid in advance by HR <input type="checkbox"/> Bill to Human Resources Office
TOTAL REQUESTED			
TOTAL APPROVED			

REQUESTED BY: _____ DATE: _____

DEPT. HEAD APPROVAL: _____ DATE: _____

HUMAN RESOURCES OFFICE APPROVAL: _____ DATE: _____

NOTE: UNLESS OTHERWISE NOTED, IT IS YOUR RESPONSIBILITY TO MAKE ALL ARRANGEMENTS TO ATTEND THIS TRAINING AND FOR ACCOMMODATIONS, TRANSPORTATION AND MEALS. IF REQUESTING A TRAVEL ADVANCE, OBTAIN FORMS FROM THE HUMAN RESOURCES OFFICE AND SUBMIT THEM TO THE HR OFFICE FOR APPROVAL AT LEAST TWO WEEKS PRIOR TO DEPARTURE DATE. WITHIN SEVEN (7) DAYS FOLLOWING YOUR RETURN, SUBMIT ALL RECEIPTS AND A COMPLETED CLAIM FORM TO THE HUMAN RESOURCES OFFICE FOR PROCESSING.