

FACILITIES DEVELOPMENT & OPERATIONS

Request for Training & Development/Travel

If you receive a certificate for ANY training please forward a copy to FD&O Payroll.

Check ALL that apply:

Training Registration:

*Required information, see below

Prepared Date: _____

Administrator's Approval: _____

Date signed

Travel Accommodation:

Please complete travel profile available at
http://www.travelcons.com/3146893_6410.htm
and attach one time so we may retain on file

AVP's Approval: _____

Date signed

Employee Name (Or Names if all attending same training): _____

Name of Event/Description of Trip: _____

Dates of Trip/Training: _____

City, State of Destination: _____

Registration Cost: _____

*Payment and registration information required: (Supply brochure, website/url or instructions for processing payment & registration otherwise request can not be processed)

Special Instructions: _____

Please indicate transportation requirements: (check one)

Car rental:

Personal vehicle: will you be claiming mileage reimbursement? YES NO

*Director approval required for use of personal vehicle and a Authorization to use private Vehicle on State Business form completed.

State vehicle: (3-day advance reservation recommended - please sign out for vehicle separately)

Airline Preferences:

Departure Date: _____ Airport: _____ Preferred Time: _____

Return Date: _____ Airport: _____ Preferred Time: _____

Hotel Reservation:

Preferred Hotel: _____

Hotel Phone Number: _____

City, State: _____

Administration use ONLY:

Requisition/TR #: _____

Chart Field: _____