

PRIOR APPROVAL FOR TRAVEL

Fiscal Year _____

Employee and Title _____ Date Submitted _____

For travel to _____ for _____
(Destination) (Conference/Workshop) *attach
Registration form

Purpose of Trip _____

SOS C.E.U. Period _____ C.E.U.s attained this Period _____

C.E.U.s to be Awarded upon completion of this training _____

Request for Use of Travel/Training Funds

Registration Fee _____ Transportation _____

Lodging _____ Meals _____ Total _____

Employee Signature _____ Date _____

Approved By: _____ Date _____

Request for Time Out of the Office to Travel

Date of Departure _____ Date of Return _____

Days Requested to be Away from the Office _____

Employee Signature _____ Date _____

Approved By: _____ Date _____