

[Church Name]
Continuing Education Request

Date: _____

From: _____ (Requesting Staff Member)

To: _____ (Supervisor)

Please attach brochure or other documents describing event.

I request approval to attend the:

Short Course

Workshop

Seminar

Conference

Meeting

Other: _____

Title of Event: _____

Location of Event: _____

Have you attended this same event prior? Yes No

If yes, when: _____

Inclusive dates of event (not including travel): _____

Cut-off date for registration: _____

Sponsor of event: _____

Does this qualify for continuing education units or credits:

Yes No If known, how many: _____

I'm a member of the sponsoring agency or organization: Yes No

Is your lodging located in the same venue as the meeting or conference? Yes No

REQUEST FOR CONTINUING EDUCATION

Estimated Cost of Participation

Course or Meeting Fees:	\$ _____
<input type="checkbox"/> Church Vehicle	\$ _____
<input type="checkbox"/> Own Vehicle	\$ _____
(Total mileage x current per mile reimbursement rate)	
<input type="checkbox"/> Rental Vehicle	\$ _____
<input type="checkbox"/> Air	\$ _____
<input type="checkbox"/> Other	\$ _____
Lodging	\$ _____
Food \$ _____ x # _____ days	\$ _____
Miscellaneous Expenses (Please list)	
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Estimated Costs:	\$ _____

If this amount exceeds the anticipated total cost by 10% or more, program budget will be required to subsidize costs.

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- I understand any advance payment of fees or related expenses will be my personal responsibility if this requires is not approved.
 - I will provide employer original receipts for any and all expenses incurred which the church is responsible.
 - I will provide employer copies of certifications of course completion for my personnel file.

Requesting Staff Member

Date

Approving Supervisor

Date

Approval must be obtained before commitment of tickets, registration, or other related costs are made. ATTACH TIME AWAY REQUEST AND SUBMIT TO CHURCH ADMINISTRATOR.