

**REQUEST TO ATTEND
PROFESSIONAL CONFERENCE or EVENT** (Please circle one)

A copy of this approved form must be attached to requests for registration, travel arrangements and travel advances.

To: _____

From: _____

Name of Conference _____
Or Event _____

Sponsoring Organization: _____

*Place: _____ Date/Dates: _____

Work time or days attending: _____

Estimated Cost of Trip:	Transportation	\$ _____	To be paid by the College unless Reimbursement for Mileage
	Lodging	_____	
	Meals	_____	
	Registration Fee	_____	To be paid by the College
	Other	_____	
	TOTAL	_____	

ACCOUNT NUMBER: _____

Reason for attending conference/event (attached program if available) _____

Signature of Requester

_____ Assistant Director/Manager	(up to \$500)	<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
_____ Director or Associate Dean	(up to \$750)	<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
_____ Dean or Associate Vice President	(up to \$1,000)	<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
_____ Vice President	(up to \$1,500)	<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
*_____ President	(over \$1,500)	<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved

Comments: _____

*All out of state conferences must be approved by the President.