

PROFESSIONAL DEVELOPMENT AND BUSINESS TRAVEL REQUEST

TO: _____

FROM: _____

DATE: _____

1. Type of Request:

_____ Professional Development
(Workshops, Conferences, Certification Requirements,
Professional Organizations, etc.)

_____ Business Travel
(Required to carry out responsibility of position)

2. Date of travel:

a) Date of meeting: _____

b) Leave Marshfield _____ a.m./p.m. on _____

3. Location of meeting: _____

*4. Type of meeting or reason for travel:

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5. Anticipated cost (for professional development only):

_____ Transportation _____ Lodging _____ Meals

_____ Registration _____ Other

APPROVED: _____ DATE: _____

*Attach copy of program when appropriate

- White copy - Mayor or Independent Board
- Yellow copy - Retain for your personal records
- Pink copy - Human Resources
- Gold copy - Finance Department