

## REQUEST TO GO TO CLASS (Firefighter)

One Name Per Form

**\*\*\*Please secure the proper signatures before returning this form to the office\*\*\***

**Instructions:**

1. All requests must be accompanied by class flyer/brochure with dates and registration cost, and a Google maps printout (if claiming mileage), and hotel options (if applicable).
2. All requests must be submitted to the BC of Training for review and approval.
3. All travel by Department personnel must be pre-approved by the Fire Chief
4. All travel by a member of the Board of Commissioners must be pre-approved by at least one other member of the Board
5. Federal Per Diem rates will be applied for all authorized meals.
6. Requests for Per Diem payments must be turned into the office with a copy of approved Travel Request form prior to the event.
7. If unexpected travel expenses are incurred and a credit card is used, all credit card requirements and applicable per diem rates will apply. A reimbursement request and receipts must be submitted within 5 days upon return for expenses incurred on personal cards.

FIREFIGHTER NAME:		DATE OF REQUEST:
NAME OF CLASS:		LOCATION:
DATE(S) OF CLASS:		
REASON FOR REQUEST:		
REGISTRATION FEE:	\$	

ANTICIPATED TRAVEL EXPENSES			
Type	Y/N	Date(s) Needed	Description
Lodging			
Meals			
Mileage			
District Vehicle			
Other Travel Needs			

**Firefighter Signature:** \_\_\_\_\_

Vector Option Y / N	Budget Verified Y / N	Approved Y / N	BC of Training Signature:
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**APPROVAL (Circle One)**

Approved	Rejected	Station Officer Signature:
Provide Reason for Approval or Rejection:		
Approved	Rejected	Chief Signature:
Provide Reason for Approval or Rejection:		

**Please return completed request forms to the BC of Training & Safety.**

REGISTERED BY: \_\_\_\_\_

DATE: \_\_\_\_\_