

RESA 1 Out of Region Travel Request

Name _____ Date _____

Name of Conference / Meeting _____

Specific Conference Location _____ Phone _____

Conference Beginning Date _____ Ending Date _____

Conference Beginning Time _____ Ending Time _____

Date(s) of Travel _____ To _____

Will You Stay Overnight _____ How Many Nights _____

Where Will You Stay _____ Phone _____

Estimated Cost of Travel _____

Specific Reason for Your Attendance _____

Attach a copy of the conference/Meeting Announcement and Agenda. Highlight the exact session you will attend. Request to be submitted three working days prior to travel.

Date _____ Employee Signature _____

_____ Approved: _____

Executive Director/Designee Date

_____ Refused: _____

Executive Director/Designee Date

Reason _____
