



Training & Travel Request Form

Employee Name: _____

Training Date(s): _____

Training Location: _____

Class Name: _____

Please check box that applies:

I am trying to earn the following certification: _____

I am trying to earn continuing education credits for _____

This trip is informational training only. No CE credits or certificates will be issued

Have you tested for this certification before? _____ If so, when? _____

Total Cost of Class & Training Materials Requested: _____

Transportation that will used:

PRCUA Company Vehicle

Personal Vehicle (mileage reimbursement)

Approximate miles round trip: _____

Will hotel/lodging be required? _____ If so, how many nights? _____

Employee Signature & Date: _____

Manager Approval & Date: _____

Director Approval & Date: _____

Board Approval & Date: _____

(Attach supporting documents, flyers, applications, etc.)