

**EVENT REQUEST FORM**

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| **Attendee Process:** 1. Complete Attendee Information, Travel Information, and Estimated Cost/Information for Event (**Must** attach event brochure/schedule information for approval).
2. Submit to Supervisor for Approval (See Note Below) / Leadership Team Members, submit to CEO for approval processing.
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| **ATTENDEE INFORMATION** |
| **Your Name/****Phone #/Job Title:** |  | **Date of Request:** |  |
| **Supervisor Name:** |  | **Emergency Contact Name & Number** (for off-site events)**:**  |  |
| **EVENT INFORMATION** |
| **Type of Event:** | [ ]  Training [ ]  Conference [ ]  Seminar [ ]  Webinar [ ]  Other |
| **Date(s) of the Event you plan to attend:** |  | **Event Location (City/State):** |  |
| **Event Title:** |  |
| **Hosting Organization Name and Billing Address:** |  |
| **Description of the Event:** |  |
| **TRAVEL ACCOMMODATION INFORMATION**(If accommodations are not needed, skip this section. If any information is unknown, follow-up with supervisor for guidance) |
| **Hotel Accommodations Needed?** | [ ] Yes[ ] No | **Rental Car Needed?** | [ ] Yes[ ] No |
| **Dates of Travel:** | Arrival Date: Depart Date:  | **Does this require Air Travel?** (if yes, enter Date of Birth for Airline Tickets) | [ ] Yes **DOB:** [ ] No |
| **Does the event provide meals?** | [ ] Yes, see next question[ ] No, skip next question | **Which meals and how many are provided by the event?** | [ ] Breakfast # [ ] Lunch # [ ] Dinner #  |
| **ESTIMATED COST/INFORMATION FOR EVENT** (Estimates below are for decision making purposes only. Mileage, parking, and toll fees must be submitted for reimbursement using *Employee Travel Reimbursement Form*. Per Diem Meals will be calculated by Executive Coordinator when applicable) |
| **Event Cost/****Registration Fees** (for your attendance)  | $ | # of Miles to and from event:  # of days: Total Est. Miles: Total Est. Cost: $  | **Mileage** (should be calculated from reporting work location to event and return, *not to or from your home.*)**Mileage Rate 2023:** $0.655 |
| **Parking Fees** (if known) | $ | **Tolls** (if known) | $ |
| **Misc.** (Explain): | $ | **Total Estimated Cost:** | **$** |
|  |  |  |  |
| **SUPERVISOR SECTION** |
| **Supervisor Process** (if you need additional lodging and travel information [hotel, rental car, etc.], submit information to Executive Coordinator for Total Estimated Cost of event before signing off)**:** 1. Complete Supervisor Section.
2. Submit this form and copies of brochure information to Executive Coordinator for processing (return originals to attendee).
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| **Cost Center Line of Coding:** |  |
| **Supervisor Decision:** | [ ] Approve[ ] Deny **Reason for denial** (review with attendee if appropriate)**:** |
| **Supervisor Signature** (by signing this form, you acknowledge that you reviewed your departmental budget and attest that you have the funds to cover the cost of this event)**:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **EXECUTIVE COORDINATOR CHECKLIST** |
| **Executive Coordinator Name:** |  | **Date Request Received:** |  |
| **Event Registration Completed:** | [ ] YesConf. #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ] N/A | **Total Event Cost:** | $ |
| **Booked Hotel:** | [ ] YesName: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Conf. #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ] N/A | **Total Lodging Est. Cost:** | $ |
| **Booked Rental Car or Airport Shuttle:** | [ ] YesName: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Conf. #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ] N/A | **Total Rental Transportation Est. Cost:** | $ |
| **Booked Flight** | [ ] YesName: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Conf. #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ] N/A | **Total Flight Cost:** | $ |
| **Submit Per Diem to Finance** (must be submitted 3 weeks in advance to event) | [ ] Yes[ ] N/A | **Total Est. Meal Cost:** | $ |
| **Create and Give Itinerary to Attendee** | [ ] Yes[ ] N/A | **TOTAL EVENT EST. COST:** (be sure to include mileage, parking, and tolls from attendee section) | $ |
| **NOTES (for Office Use Only)** | **MNJTP Eligible:** [ ]  Yes [ ]  No |