



Instruction Sheet for Completion of EYSC Training & Travel Pre-Approval Request Form

(Failure to complete form accurately & completely will result in it being returned to you for additional information)
08172020

<<Form is on page 2 of this document>>

NAME Type Your Name Here and Add your signature
DEPARTMENT Everett FC Coaching Staff, EYSC Coaching Staff, Operations
REQUEST DATE The date you complete the form
PURPOSE & BENEFIT Include specific information related to how this training will benefit you and the organization
OPERATIONAL IMPACT Specify if backfill will be required during training

MANDATORY/VOLUNTARY Check appropriate box

NAME/
LOCATION OF TRAINING Name of Training Class AND Location of Training (Class name/City where training is)

SPONSOR Who is putting the class on (USSF, US Club, Institute of...)

DATES/HOURS When is the training – dates and hours of the training

TRANSPORTATION If air travel is required, attach printout showing range of fares available for dates needed
Departure and Return dates need to be specified

PERSONAL CAR Please use Standard mileage reimbursement rate or attach Mapquest / Google Maps printout showing TO and FROM to support mileage reimbursement

LODGING Please attach printout from hotel or internet site showing cost for stay – include taxes

MEALS Links are provided at the bottom of the form for estimated per diem for meals.
First Link determines the per diem for city/area where training is
Second link provides the breakfast, lunch, and dinner breakdown
Enter breakfast, lunch, and dinner per diem (from 2nd link) in the boxes on top of the table
Enter dates of training
Enter "P" for meals provided as part of training
Enter amount allowed for meals that are not provided as part of training
Total each day in the "TOTAL by Date" column
Total for entire period in the "AMOUNT" column of the form

REGISTRATION FEE Enter amount and due date (if stated) for registration

CONFERENCE FEES Enter amount, if applicable (books or other related costs)

OTHER COSTS Enter amount, if applicable (conference dinners not included in registration, parking & ferry fees, etc)

Turn in completed form with all attached supporting documentation to the Director of Coaching and Treasurer. After their review, it will be forwarded to the Executive Board to complete the approval process. You will be notified of the status of the request once final approval/denial has occurred.



EYSC Training & Travel Pre-Approval Request Form

Please use Instruction Sheet to Correctly Complete this Form
08172020

Name (Printed)		Signature			
Request Date		Department			
Purpose & Benefit to you and EYSC (use back if needed)		Operational Impact (if any)			
Training Information		Check One: <input type="checkbox"/> Mandatory (required for position) <input type="checkbox"/> Voluntary			
Name/Location of Training					
Sponsor					
Dates/Hours					
Expenses	Dates/Time	Details	Amount		
Transportation		<input type="checkbox"/> Air <input type="checkbox"/> Taxi <input type="checkbox"/> Rental car <input type="checkbox"/> Other	\$		
Departure		<input type="checkbox"/> Air <input type="checkbox"/> Taxi <input type="checkbox"/> Rental car <input type="checkbox"/> Other	\$		
Return		<input type="checkbox"/> Air <input type="checkbox"/> Taxi <input type="checkbox"/> Rental car <input type="checkbox"/> Other	\$		
		<input type="checkbox"/> Air <input type="checkbox"/> Taxi <input type="checkbox"/> Rental car <input type="checkbox"/> Other	\$		
Personal Car					
Lodging (include taxes)			\$		
MEALS -- Enter "P" if provided -- Use links below to determine Per Diem amount and breakdown for Breakfast, Lunch & Dinner. -- If additional dates, please attach separate sheet. -- enter total in Amt column		Break	Lunch	Dinner	TOTAL by Date
	Date				
	Date				
	Date				
	Date				
Registration Fee		Due Date			\$
Conference fees		Purpose			\$
		Purpose			\$
Other Costs		Purpose			\$
		Purpose			\$
Total Estimated Costs					\$
Please attach Course Announcement and detail of additional costs before submitting for approval					
Approval Signatures					Date
DOC Approval: _____					_____
Treasurer Approval: _____					_____
Executive Board Approval: _____					_____
EXEC BOARD USE ONLY					
<input type="checkbox"/> If denied indicate reason: _____					
<input type="checkbox"/> Registration/Reservations Complete					
<input type="checkbox"/> Logged in Training Database					

To determine Per Diem - <http://www.gsa.gov/portal/category/21287>

To determine breakfast, lunch, and dinner breakdown - <http://www.gsa.gov/portal/content/101518>