



CONFERENCE / TRAVEL REQUEST

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ASSOCIATE # \_\_\_\_\_ COMPANY # \_\_\_\_\_ DEPARTMENT # \_\_\_\_\_ DEPT. TO CHARGE: \_\_\_\_\_  
(up to 3 digits) (must be 4 digits)

CONFERENCE TITLE \_\_\_\_\_

SPONSORED BY \_\_\_\_\_

LOCATION \_\_\_\_\_ DATE(S) \_\_\_\_\_

I. REASON FOR REQUESTING ATTENDANCE:  
\_\_\_\_\_  
\_\_\_\_\_

II. PLANS FOR SHARING INFORMATION:  
\_\_\_\_\_  
\_\_\_\_\_

III. REGISTRATION FEE \_\_\_\_\_  
AIR FARE \_\_\_\_\_  
BUS/TRAIN FARE \_\_\_\_\_  
PARKING AND TOLLS \_\_\_\_\_  
CAR RENTAL, TAXI \_\_\_\_\_  
HOTEL EXPENSE \_\_\_\_\_  
MEALS (See policy for maximum) \_\_\_\_\_  
TIPS \_\_\_\_\_  
MILEAGE \_\_\_\_\_  
ESTIMATED TOTAL COST \_\_\_\_\_

DO NOT WRITE IN THIS AREA  
ACTUAL COSTS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IV. ACTION/RECOMMENDATION:  
A. SUPERVISOR/MANAGER  
BUDGET PERMITS:  YES  NO  
RECOMMEND ATTENDANCE:  YES  NO

ASSOCIATE SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

B. DIRECTOR SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
( < \$1500)

C. EXECUTIVE SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
( > \$1500 but < \$5000)

\*READ THE BACK OF THIS FORM FOR GUIDELINES.  
PR-112 (Rev.4/04)

GUIDELINES:

I. REPRESENTATIVE SELECTION

- A. Associate may be asked to attend conference by management as a representative of Sparrow Hospital.
- B. Associates may request to attend.

II. APPLICATION TO ATTEND

- A. Complete this "Conference/Travel Request" form.
- B. Give the completed request and any program information material to your immediate supervisor, who will make a recommendation and give the request and program information to the Director.
- C. If approved, the Director will send the request and information to the Executive for final approval (executive pre-approval is required for conferences/travel with estimated costs greater than \$1500 but less than \$5,000). CEO pre-approval is required for all travel outside the 48 contiguous states or Canada.
- D. Allowable expenses are outlined in Human Resource Policy #336 Travel and Business Expense Reimbursement Policy. Reimbursable expenses include registration fee, travel, lodging, meals, and other expenses as outlined in that policy. See that policy for any limits that apply.

III. PROCEDURE WHEN APPROVED

- A. Make travel arrangements where appropriate, i.e: make airline reservations.
- B. Give copies of the approved request to:
  - 1. Accounts Payable (original copy)
  - 2. Supervisor
  - 3. Scheduling secretary in the case of nursing units.
- C. Participant will:
  - 1. Complete form F-13110, "Request for Time Off" indicating dates involved and name and location of conference.
  - 2. Assist in providing staff coverage.

IV. PROCEDURE DURING CONFERENCE

- A. Take notes or tape record appropriate material for sharing.
- B. Maintain daily record of expenditures and save original receipts.

V. PROCEDURE AFTER CONFERENCE

Complete A-112 "Expense Report" form in accordance with Human Resource Policy #336 "Travel and Business Expense Reimbursement" within ten working days of return.