



Conference/Training Request

Submit form and agenda for review.

Do not make arrangements until HSEM approves your request.

All fields required. Use Acrobat or Reader 11.0 or later.

Request Date:

Request Type: Conference/Workshop NTED Training # Non-NTED Training (Complete pgs. 1 & 2)

Requestor Information

Jurisdiction: Phone:

Name: Email:

Grant Information

Federal Grant Year: Grant Number:

Program: Purpose: Training Planning M & A

Event Information

Date(s): Depart: Return:

Event Name: Sponsor:

Location:

Description (attach additional document if necessary):

Names and Titles of Participants:

Attendance Justification:

Agency Goals:

Estimated Costs:

| Expense | Cost | Number Attending | Nights/ Days | Total |
|-----------------------------|------|------------------|--------------|-------|
| Travel | | | | |
| Ground Transport | | | | |
| Lodging | | | | |
| Meals (by day) | | | | |
| Registration | | | | |
| Other | | | | |
| Other | | | | |
| Total Estimated Cost | | | | |

Email agenda and completed form to:

Matti Gurney (EMPG, HMEP, SHSP)

Michelle Schaber (NSGP, OPSG, UASI)

For reimbursement submit:

- Approved HSEM form
- Invoice
- Proof of payment

HSEM Review

Approve

Deny

Grant Manager

Date