

Date: _____

ISTD OFF-CAMPUS CONFERENCE REQUEST FORM
(Conference/Seminar/Workshop)

Name: _____

WCC ID: @ _____

E-mail: _____

Office Location: _____

Please describe how this opportunity will benefit you, the College, or enhance your job performance?

Are department/division funds available to help defray any part of the expenses? (It is expected that funds be requested from your Home Org before requesting ISTD funds.)

Yes _____ No _____ Amount \$ _____

If so, please provide the FOAPAL here:

F _____ O _____ A _____ P _____ A _____

For your request to be approved, please attach all necessary documentation to this form:

- ◆ A completed Pre-Conference Travel Form with: employee and supervisor signatures and expected costs
- ◆ A copy of the Conference Program, event flyer, or workshop agenda
- ◆ A copy of the registration/payment form or website address, if you need us to send a check or submit payment on your behalf
- ◆ A copy of the directions and mileage to the event destination from WCC

Please return this form to Andrea Hemphill in BE120. Once approved, you will receive a copy of the documentation and requisition number for your records. Following your attendance, please remember to submit your Post-Conference Travel form to Andrea Hemphill within 30 days.