2015-16 Perkins Travel Approval Form

This form MUST be completed and all approvals secured for any Perkins related travel before scheduled activity.

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| **Barton Community College** |
| Traveler’s Name(s) |  |
| Conference Title |  |
| Conference Location |  |
| Conference Start and End Date |  |
| Date of Departure and Return |  |
| Travel Purpose (how it contributes to the success of the program) |  |
| Approved Travel Amount |  |

You will need to provide and agenda/brochure of the conference/training activity. This can be provided with this approval form, or attached to the Professional Development Form that is required upon your return.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\* Signature Below Indicate Approval of Trip \*\*

Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

(This form MUST be signed by both parties and sent electronically to the

Perkins Administrator at least one week prior to travel.)