

**Philomath Fire & Rescue
Personnel Training/Conference Request Form**

Name: _____ Date: _____

Title of class/conference: _____

Location: _____ Date & hours: _____

Cost of class/conference: _____ Travel: Dept. vehicle? yes no. Cost: _____

Number of overnight stay(s): _____ Overnight cost: _____

Meal cost: _____ Cost advance requested yes no
(District pays out no more than: Breakfast \$8, Lunch \$12, Dinner\$20), turn in all receipts to Administrative Assistant.

Please attach flyer or class/conference information.

Approved by Fire Training Officer or EMS Officer Yes No

Reason for not being approved:

For Staff: Overtime or day(s) off approved by Chief: _____ Chiefs initials Yes No

Fire or EMS Training Officer: _____

Please be aware that if you must cancel your participation in the class, you must do so in the appropriate manner required for the class (so the fire department is not billed for the class). If this is not done, you are responsible for paying the cost of the class on your own. Philomath Fire & Rescue encourages its personnel to participate in outside classes. However, we can not afford to pay for classes that people do not attend. If you have any questions please talk to the EMS Officer, or Training Officer.

Requester Sign: _____ Date: _____

(Philomath Fire & Rescue Training Request Form)

PROTECT _____ PREVENT _____ PRESERVE _____