

**VABIR**  
**STAFF TRAINING/CONFERENCE ATTENDANCE**  
**REQUEST FORM**

Name: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Last Training/Conference Attended: \_\_\_\_\_

Topic: \_\_\_\_\_

Cost: \$ \_\_\_\_\_

Your special interests/training needs are: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Request to attend: \_\_\_\_\_

\_\_\_\_\_

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

Cost: \$ \_\_\_\_\_

Briefly describe benefit to you and/or VABIR: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Request Approved: (    ) Yes      (    ) No

*All receipts must be submitted to receive reimbursement for meals, mileage, etc.*