



Charlton County Fire & Rescue
*The Desire to Serve
 The Courage to Act
 The Ability to Perform*



REQUEST FOR TRAVEL/TRAINING FORM

School/Seminar: _____

Location: _____

Mileage from CCFR Station 1: _____

Dates: From _____ To _____

Program Description: _____

Benefit to the Department: _____

| | | |
|--------|----------|--------|
| Costs: | Estimate | Actual |
|--------|----------|--------|

| | | |
|---------------|-------|-------|
| Registration: | _____ | _____ |
|---------------|-------|-------|

| | | |
|-----------------|-------|-------|
| Accommodations: | _____ | _____ |
|-----------------|-------|-------|

| | | |
|--------|-------|-------|
| Meals: | _____ | _____ |
|--------|-------|-------|

| | | |
|-----------------|-------|-------|
| Transportation: | _____ | _____ |
|-----------------|-------|-------|

| | | |
|--------|-------|-------|
| Total: | _____ | _____ |
|--------|-------|-------|

| | | | |
|----------|----------------|---------------|-------------------|
| Request: | Travel Advance | Reimbursement | Receipts Attached |
|----------|----------------|---------------|-------------------|

Approved: _____ Amended: _____ Denied: _____

Fire Chief: _____ Date: _____