

**Professional Travel and Enrichment Requests**  
**Officers, Departmental, Pastors, Office Staff, Teachers**

NAME \_\_\_\_\_ DATE \_\_\_\_\_

Please Fill Out the Sections That Pertain to Your Travel –*Submit at least Two Weeks Prior to Making Arrangements.* Vacation requests should be submitted on the regular vacation request form.

I. Travel When ADCOM Approval Is **Not** Necessary (See also Section III)

Purpose of Trip

- Pre-approved Degree Program
- Pre-approved Professional Enrichment (Seminars, etc.)
- Pre-approved Departmental Trip

II. Travel When ADCOM Approval **Is** Necessary (See also Sections III and IV)

Purpose of Trip

- Degree Program
- Professional Enrichment (Seminars, etc.)
- Departmental
- Requested by Another Organization (*Travel requests must be in accordance with NAD Policy C 15*)
- Other

III. Additional Information

Departure Date \_\_\_\_\_ Return Date \_\_\_\_\_ Total Days Including Travel days \_\_\_\_\_

Title and Description of Event: \_\_\_\_\_

Location: \_\_\_\_\_

Phone Number in Case of an Emergency: \_\_\_\_\_

Contact Individuals for Each Church: \_\_\_\_\_

IV. Reimbursement Requested

- Travel \$ \_\_\_\_\_ (The lesser of the current mileage rate or airfare)
- Lodging \$ \_\_\_\_\_
- Pet Diem \$ \_\_\_\_\_
- Registration and/or Seminar Fees \$ \_\_\_\_\_
- No Reimbursement Requested

**For Administrative Use**

Approved     Not Approved     See comments \_\_\_\_\_

Administrative Officer: \_\_\_\_\_

ADCOM Date: \_\_\_\_\_ ADCOM Vote #: \_\_\_\_\_