



OHIO DEPARTMENT OF NATURAL RESOURCES

Request for approval of external professional development activities

(Employees should use the "Out of State Travel" form in place of this form if, and only if, out of state travel is required)

Employee Name (please print or type): _____

Employee Division: _____

Event Type: _____
(e.g., Training, Education, Convention, Professional Assn. Meeting, etc.)

Event Sponsor/Provider: _____

Event Location: _____

Event Date(s) and Time(s): _____

If paid for by public funds, what is the cost of registration for the event?
\$ _____

How will attendance at this event help improve your performance in your current position and/or benefit the overall mission of ODNR? (Attach all program agendas)

Four horizontal lines for providing details on how attendance will improve performance.

Employee's Signature: _____ Date: _____

Please attach copies of information covering event description, date(s) and time(s) and cost (if required) from the sponsor's or provider's brochure or other information.

Employee Supervisor Signature: _____ Number of hours approved: _____
[] Recommend [] Do not recommend

SIGNATURES OF APPROVAL

Fiscal Services Officer*: _____ Date: _____

Division Chief (or Designee): _____ Date: _____

Director (or Designee): _____ Date: _____

*This signature is required only if attendance at the event is to be paid for by the Department.
(Nothing on this form should be read to controvert the Governor's Executive orders pertaining to ethics policy or to the purchase of food.)