

INVITATIONAL TRAINING REQUEST FORM

EVENT

Dates of Event: _____

Location: _____

ATTENDEE

Attendee Name: _____

Position: _____ Jurisdiction: _____

Jurisdiction Mailing Address: _____

Fax Number: _____ Business/Home Phone: _____

Email: _____

REIMBURSIBLE EXPENSES (Check one)

- | | |
|---|------|
| <input type="checkbox"/> Floodplain Management Refresher | \$80 |
| <input type="checkbox"/> Building Inspections & Plan Review in the Floodplain | \$80 |

JUSTIFICATION:

I confirm that I perform floodplain management duties (floodplain administrator, planner plan review, building official, building inspector, other: _____) at my jurisdiction and that I am an employee of local government or a council of governments. I also confirm that I have not attended the course to which I am seeking invitational travel during the last 12 months.

Attendee Signature: _____

DLCD Comments: