

# MARYLAND PARK SERVICE

**Out-Service** (outside of the MPS)      **Out-of-State**  
Please circle one

## THE FOLLOWING TRAINING/TRAVEL REQUEST IS APPROVED FOR:

Attendee(s) _____	PARK/REGION: _____
DATE OF TRAINING: _____	LOCATION OF TRAINING: _____
COURSE: _____	HOURS OF TRAINING: _____
APPROPRIATION #: _____	AUTHORIZATION #: _____ (out-of-state only)
AIRFARE \$ _____	
REGISTRY AND/OR TUITION: \$ _____	
BOOKS / MATERIALS: \$ _____	
ROOM / SUBSISTENCE: \$ _____	
TRAVEL: \$ _____	
ESTIMATED TOTAL EXPENSE: \$ _____	

### To be filled out by the applicant:

What is the benefit to the Park Service to have you attend this training? (use the back if necessary)

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Upon completion of the training you will be required to submit a copy of the agenda, handouts that you received and a report on the important points that will help the MPS. In addition, you may be ask to provide an Instructor lesson plan, so that you may present the training to other employees.

\_\_\_\_\_ I agree to the above requirements to attend this training.

Applicant

Date

\_\_\_\_\_  
Nita Settina Date

\_\_\_\_\_  
Robin Melton Date

\_\_\_\_\_  
Barb Knisely Date

\_\_\_\_\_  
Park Manager Date