

FORM B - SAN DIEGO CITY COLLEGE PRE-AUTHORIZATION NON-TRAVEL OR ABSENCE FROM CAMPUS REQUESTS

This form is primarily used for a request for professional learning funds that do not require an absence from campus or travel. For example, an online conference, online workshop, asynchronous learning opportunity, etc.

INSTRUCTIONS: Please complete this form BEFORE any funds are spent. Once you have received permission, you may complete the transaction for the activity. All reimbursements will be made upon submission of the online Payment Request following the approved activity with all receipts attached. Complete this form in its entirety. If you are requesting an advance, please enter the amount in the ADVANCE REQUESTED section.

REQUESTOR INFORMATION

A. Requestor Name (last name, first name, middle) _____

Requestor EID# _____

B. Department _____

Position Title _____

Contract or Part-Time (underline your selection)

C. Organization Hosting the Event _____

D. Date of Event _____

E. Brief Description & Reason for Engaging in the Activity

(type in the box below, 100–150 character limit)

ATTACH SUPPORTING DOCUMENTATION TO THIS FORM PRIOR TO REQUESTING APPROVAL

ESTIMATED FUNDS REQUESTED

ACTIVITY REGISTRATION / FEE

☐ Traveler to Pay (reimbursable) or

☐ Check Request to Vendor ([complete online once approved](#))

TOTAL COST \$ _____

FORM COMPLETED BY (TYPE NAME): _____

-----Workgroup Use Only-----

CHARGE TO:

FD:	Dept:	Acty:	Obj:	Amt: \$	Bud Mgr Sign

Traveler Printed Name: _____

APPROVED

☐ Yes

☐ No

Funding Request Workgroup (Type Name)

Date