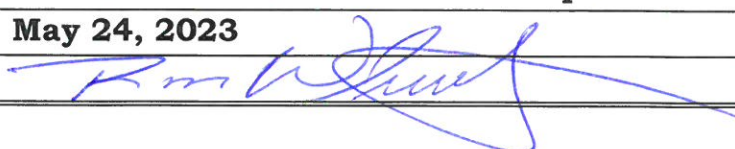


SCOTTS VALLEY FIRE PROTECTION DISTRICT



STANDARD OPERATING PROCEDURES	ARTICLE: I	SOP: 1127
	SECTION: 1100 Personnel	
	SUBJECT: Education & Travel Request	
	DATE APPROVED: May 24, 2023	
APPROVED:		

Purpose: To establish a procedure for Scotts Valley Fire Protection District (SVFPD) personnel to request approval to attend outside education, seminars, training etc.

Scope: This procedure shall apply to all (SVFPD) personnel.

Procedure:

1. The employee will submit the completed Education and Travel Request Form to the direct supervisor.
2. Firefighters and Engineers will submit to Captains. Captains will submit to Battalion Chiefs. Battalion Chiefs will submit to the Fire Chief.
3. The employee will attach the class flyer.
4. Determine mode of transportation. To be approved by their supervisor.
5. Attach lodging costs and / or invoices, receipts, etc.
6. If ETO has been selected to cover expenses, the employee and their direct supervisor will confirm the employees ETO balances.
7. The supervisor will then submit the request form and all supporting documentation to the Chief officer for final approval.
8. Once approved, the request form and all supporting documentation will be submitted to the Training Chief.
9. For reimbursement, please refer to Policy 1601: Travel Expense Reimbursement.



SCOTTS VALLEY FIRE PROTECTION DISTRICT

7 Erba Lane, Scotts Valley, California 95066 (831) 438-0211 Fax (831) 438-0383

EDUCATION AND TRAVEL REQUEST FORM

Employee Name: _____

Event Name: _____

Event Dates: _____

Event Location: _____

Event Cost: _____ ETO: ☐ Yes ☐ No

<u>Travel</u> ETO: <input type="checkbox"/> Yes <input type="checkbox"/> No Private Vehicle: <input type="checkbox"/> Yes <input type="checkbox"/> No SVFPD Vehicle: <input type="checkbox"/> Yes <input type="checkbox"/> No Other: _____ Cost: _____	<u>Lodging</u> ETO: <input type="checkbox"/> Yes <input type="checkbox"/> No Lodging Name: _____ Cost: _____
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Notes:

Employee: _____ Date: _____

Supervisor: _____ Date: _____

Training Officer: _____ Date: _____