

Expense Authorization Form

Training & Conference

Date: _____

Employee Name: _____

Department: _____

Conference/Training Title: _____

Date(s) of Event: _____

Location: _____

Estimated Expense Breakdown:

Expense Item	Description	Estimated Amount
Registration Fee		\$ _____
Transportation	Airfare, mileage, taxi, etc.	\$ _____
Lodging	Hotel, accommodation	\$ _____
Meals		\$ _____
Other (specify):		\$ _____
Total Estimated Cost:		\$ _____

Justification & Benefit to Organization:

Approvals

Employee Signature & Date

Supervisor/Manager Signature & Date

Finance/Budget Approval & Date

Note: Attach conference/training brochure and any supporting documentation. Retain a copy for your records. Use this form to ensure transparent documentation of all anticipated expenses related to training or conference attendance.