

## EAP Request Form for Non-MC Courses, Seminars, Conferences, Workshops, Memberships

### SECTION I. EMPLOYEE INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MC ID: \_\_\_\_\_  
 Date of Hire: \_\_\_\_\_ Employment Status: ☐ Staff ☐ Faculty ☐ Administrator  
 Employment Status: Full-time Part-time Department: \_\_\_\_\_  
 Campus: R G TP/SS CT GBTC WHPL Job Title: \_\_\_\_\_

SECTION II. TYPE OF REQUEST		EAP CRITERIA	
Course?		Preparing for higher level duties or another career at MC?	
Professional Membership?		Job related?	
Seminar/Conference/Workshop?		A requirement in a job-related degree seeking program??	

Please provide explanation/justification of how request meets one or more of the criteria:

### SECTION III. PAYMENT OPTIONS

☐ Pay vendor (invoice/completed registration)
 ☐ Reimburse me (receipt(s))

### SECTION IV. ACTIVITY INFORMATION

#### NON-MC COURSES, SEMINARS, CONFERENCE OR WORKSHOP INFORMATION

ORGANIZATION/ INSTITUTION	TITLE	BEGIN/END DATES	AMOUNT
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FOR EAP TRAVEL ONLY. Completed Registration Form or Proof of Payment Required to Encumber Travel Funds:

Complete Prior to Travel:		Estimated Expense
Lodging		**This area is for travel fees only. **Only send airfare documentation when submitting EAP request. **Locally hosted events do not qualify for EAP Travel Related funds. **Please use the EAP Related Travel Account form when submitting for reimbursement **Please included <b>detailed</b> meal receipts **Please <b>tape</b> the smaller receipts to a page to avoid the possibility of loss.
Airfare		
Private Transportation		
Local Transportation		
Parking		
Meals		
Other		
<b>**Estimated Total</b>		\$

**\*\*PROVIDE DOCUMENTATION OF ESTIMATED AIRFARE ONLY**

### APPROVAL

Employee Signature		Date:
Supervisor Signature		Date:
Authorized HRSTM Signature		Date:

### FOR HR USE ONLY - NON-MC COURSES SEMINARS CONFERENCES OR WORKSHOPS

Amount: \_\_\_\_\_ Account Number: \_\_\_\_\_ Record No: \_\_\_\_\_



## CHECKLIST FOR EAP FORM

### **SECTION I. EMPLOYEE INFO**

- ☐ Complete the entire section.

### **SECTION II. TYPE OF REQUEST**

- ☐ Check all boxes that apply “Type of Request” as well as “EAP Criteria.” Please Complete the justification for your supervisor.
- Requests for memberships do not require justifications unless the memberships are not job related.
- ☐ Multi-year and lifelong memberships are not EAP eligible.

### **SECTION III. PAYMENT OPTIONS**

- ☐ Please check “Pay Vendor” or “Reimburse Me”
- If you choose to have MC prepay, please submit a completed registration form or invoice. Please confirm that the address is included with supporting documentation.
    - ☐ If you are submitting for college courses and don’t have an invoice, please attach schedule reflecting dates and credits and account summary reflecting costs for course.
  - If you choose to be reimbursed, please submit proof of payment with your request.
    - ☐ If a cancelled check serves as your proof of payment, please include the front and back images of the check as well as documentation from the organization that provides the cost of the event/course/workshop.

### **SECTION IV. EVENT INFORMATION**

- ☐ Please complete this area in its entirety.
- In the “Organization/Institution” area should be the name that payment will be issued to – please check the registration form to confirm this information is correct.

## **SECTION IV. EVENT INFORMATION (cont'd)**

- For memberships, the name of the organization should be completed in the same manner with the name under the “Organization/Institution” area, professional membership or annual dues under “Title”, exact begin and end dates of membership under “Begin/End Dates,” and cost under “Amount.”

The area below Section IV is for **EAP Travel ONLY**. If you will not be utilizing this benefit, please leave this area blank.

If you are attending a conference and will be utilizing this benefit, please complete this section. Doing so, will result in travel funds being encumbered for you.

If your travel requires airfare, please attach documentation supporting your airfare reservation (only). P&P states that the lowest airfare possible be utilized for college travel.

While baggage fees are reimbursable, pre-check-in fees are not.

Upon completion of the form, please remember to sign and obtain the required signatures from your department and forward to HRSTM for processing.

Upon completion of travel, please submit your travel claim utilizing the EAP-Related Reimbursement Request for Long Distant Travel Funds (can be found on MyMC) within 30 days of travel. Failure to submit travel claims within 30 days of travel will result in the release of your encumbered travel funds.

If you know prior to travel that your expenses will exceed the EAP Travel allowance, please submit the Long Distance Travel Form (found on the site for Office of Business Services) to your department for authorization to cover the balance. That form will go to Office of Business Services, not HRSTM, upon completion of your travel.