

# GRANT COUNTY FIRE DISTRICT #3

1201 CENTRAL AVENUE S • P.O. BOX 565 • QUINCY, WA 98848  
P: (509)787-2713 | WWW.GCFD3.NET

## TRAINING REQUEST

Requested by: \_\_\_\_\_ Station: \_\_\_\_\_ Date: \_\_\_\_\_ Rank: \_\_\_\_\_

Training Title: \_\_\_\_\_

Training Dates: \_\_\_\_\_

Training Location: \_\_\_\_\_

Name of Motel / Hotel: \_\_\_\_\_ Phone #: \_\_\_\_\_

Training Justification: \_\_\_\_\_

### Training Cost:

Class Registration: \_\_\_\_\_

Est. Lodging: \_\_\_\_\_

Per Diem: \_\_\_\_\_

Mileage Est: \_\_\_\_\_

Other Cost: \_\_\_\_\_

Est. Total: \_\_\_\_\_

Will you be gone on your duty shift? No \_\_\_ Yes \_\_\_

Explain \_\_\_\_\_

Will there be any overtime accrued? No \_\_\_ Yes \_\_\_

Explain \_\_\_\_\_

Is an Activity/Drill sheet attached? Yes \_\_\_ No \_\_\_

Explain \_\_\_\_\_

Is a Leave form attached? Yes \_\_\_ No \_\_\_

Explain \_\_\_\_\_

Is a Per Diem form attached? Yes \_\_\_ No \_\_\_

Explain \_\_\_\_\_

Is the class announcement attached? Yes \_\_\_ No \_\_\_

Explain \_\_\_\_\_

Will you need a staff vehicle? Yes \_\_\_ No \_\_\_ Date / Time: \_\_\_\_\_

Respectfully Submitted: \_\_\_\_\_

Approved: Yes \_\_\_ No \_\_\_ Date \_\_\_\_\_

Explain \_\_\_\_\_

By: \_\_\_\_\_ Title: \_\_\_\_\_