

TRAINING/EDUCATIONAL AID REQUEST (T.E.A.R.)

Name: _____

Training/Education Course Name (Include Flyer):

Date(s) of Course:

Course Location (City, State):

Step 1: Please Check what support is being requested:

☐ **Tuition** (registration fee, tuition, books, etc.)

○ Cost: _____

☐ **Shift coverage**

○ Please include dates of required coverage.

○ Dates: _____

☐ **Per Diem**

○ Cost: _____

☐ **Lodging**

○ Cost: _____

☐ **Travel Cost**

○ Mileage Reimbursement: _____

○ Airfare: _____

○ Rental Vehicle cost: _____

Employee signature acknowledges that (1) proof of attendance/completion for any department-approved training/education must be submitted to the Division Chief of Training with a completed Training Report upon completion of the course and (2) the district will be reimbursed for all approved costs incurred for failure to attend or complete approved training if prior arrangements are not made.

Employee Signature: _____ Date: _____

Step 2: Supervisor Approval

Shift Personnel must request initial approval through their Battalion Chief. Fire and Life Safety Personnel through the Fire Marshal. Administration Staff through the Chief Administrative Officer. Volunteers will request through the DC of Training.

Supervisor Signature: _____

Support Approved:

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> Tuition | <input type="checkbox"/> Lodging |
| <input type="checkbox"/> Shift Coverage | <input type="checkbox"/> Rental Car |
| <input type="checkbox"/> Per Diem | <input type="checkbox"/> Travel Cost |

Comments: _____

Step 3: Training Officer Approval (All out of state request will be reviewed by the Fire Chief)

Division Chief of Training Signature: _____

Support Approved:

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> Tuition | <input type="checkbox"/> Lodging |
| <input type="checkbox"/> Shift Coverage | <input type="checkbox"/> Rental Car |
| <input type="checkbox"/> Per Diem | <input type="checkbox"/> Travel Cost |

Comments: _____

Battalion Chief Requests (Will be submitted to the Division Chief of Training)

Step 4: A copy of this document will be retained by the Division Chief of Training and a copy forwarded to the employee and their supervisor.