

SOUTHEASTERN CALIFORNIA CONFERENCE

**PASTOR TRAVEL REQUEST**

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**OUT OF THE FIELD TRAVEL ONLY. NOT A VACATION REQUEST FORM**

This form is to be submitted to the president's office 3 weeks before a schedule trip (or as soon as you are aware of a need to travel outside of the conference). Requests are processed through Administrative Council. The purpose of this form is to create a record of authorized trips for Workman's Compensation Insurance coverage. For emergency travel, contact a conference administrator.

**Name:** \_\_\_\_\_

**Church:** \_\_\_\_\_

**Dates away:** \_\_\_\_\_  
*(Include travel days)*

**Destination:** \_\_\_\_\_  
*(Letter of request for speaking appointment)*

**Trip Purpose:** \_\_\_\_\_

**Who will cover during absence:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Who Is Responsible for Expenses?** \_\_\_\_\_

**\*Senior Pastor Approval:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Administrative Council:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Beginning Balance** \_\_\_\_\_ **days**  
**Requesting** \_\_\_\_\_ **days**  
**New Balance** \_\_\_\_\_ **days**

*\*If applicable*