

Request

Complete this form to request pre-approval to participate in a conference or attend training.

EMPLOYEE INFORMATION

Request Date	DD/MM/YYYY
Employee Name	
Department	

CONFERENCE/COURSE DETAILS

Conference/Course Name	
Conference/Course Description	
Institution/Venue	Eg: ABC University, Sheraton Conference Center, online course
Location	
Accredited Course?	Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If yes, complete Accredited Course Details table below.</i>
Dates	From: DD/MM/YYYY To: DD/MM/YYYY
Total Anticipated Hours	During working hours (paid time off): <input type="text"/> Outside working hours: <input type="text"/>

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This template is included in the ConnectsUs HR™ Toolkits.



Set up your HR Department

A complete HR Toolkit for small business to create and maintain your HR fundamentals.

Create your HR materials

- 260+ premium templates to create contracts, employee manuals, forms, spreadsheets and manager guides
- Download your HR folders
- Identify your HR priorities
- 22 HR topics
- Create HR intranet

Support your HR Function

- COVID-19 Portal
- Legislation Portal
- Remote Workforce Portal
- Mental Health Portal
- Diversity & Inclusion Portal
- Weekly updates, email notifications
- Help & support. With real humans!

Create HR for Clients

HR Toolkit for Small Business, but made for HR consultants with the following differences:

- Special licensing for use with clients
- Additional module + additional download of pre-assembled folders and templates to create your own master HR toolkit to re-use for new clients
- Pricing.



EMPLOYEE SIGNATURE

Employee: <input type="text"/> Insert Name, <input type="text"/> Insert Title	
Signature	Date
FOR ACCREDITED COURSES ONLY If the Company incurs the cost of tuition and other related accredited course costs ("Pre-payment"), and I do not provide the Company with official confirmation of CUSTOMIZER: Insert passing grade/minimum standards for successful passing mark within 30 (thirty) days of course completion, I understand and agree that any advance payments made by the Company will be deducted from my subsequent pay check.	
Employee Signature	Date

APPROVED BY

Manager: <input type="text"/> Insert Name, <input type="text"/> Insert Title	
Signature	Date

HR: <input type="text"/> Insert Name, <input type="text"/> Insert Title	
Signature	Date

For costs exceeding \$CUSTOMIZER: Insert your cost ceiling that requires another level of approval, Finance approval is required.

Finance: <input type="text"/> Insert Name, <input type="text"/> Insert Title

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