Training / Seminar Approval Form) RIGINAL

| Department Name: | partment Name: Sheriff's Office | | |
|---|------------------------------------|------------------------------------|--------------|
| Seminar Name: | training | | |
| Purpose: | | | |
| Place: | Austin, Texas | 7 | |
| Date: | 05/11/2015-05/15/2015 | | |
| Who Will Be Attendi Captain David Blan | 8 | | |
| This Training | / Seminar is necessary for the | e following reasons: | |
| | I continuing education | XXX Job training | |
| XXX Improve work performance Required certification | | | |
| Attach Regist | ration Form and Complete th | ne following information: | |
| Amount of registration \$ 190.00 Date registration is due PO# 15-1221 | | | |
| Return che | eck to department head | | |
| XXXRequest Tr | easurer to mail check with registr | ration | |
| If an advance is | requested, attach a completed Joh | unson County Travel Form. | |
| Deptartment Head Si | ignature: | Man Description | 010-561-5410 |
| *SEND FORM | 1 TO COUNTY JUDGE'S O | FFICE* | |
| RECEIVED B | Y COUNTY JUDGE'S OFFIC | | |
| APPROVED BY | Y COMMISSIONER'S COURT | Approved by CC: JAN 12 2015 DATE: | |

Training / Seminar Approval Form ORIGINAL

| Department Name: | District Clerk | | | |
|---|-------------------------------|----------------------------|--|--|
| Seminar Name: | 2015 Education Roundup | | | |
| Purpose: | Required Continuing Education | | | |
| Place: | San Marcos, TX | | | |
| Date: | 1/20-23/2015 | | | |
| Who Will Be Attendi David Lloyd | ng: | | | |
| Christopher Taylor | | | | |
| | | | | |
| This Training/ | Seminar is necessary for | the following reasons: | | |
| X Required continuing education X J | | X Job training | | |
| X Improve work | performance | X Required certification | | |
| Attach Registra | ation Form and Complete | the following information: | | |
| Amount of registration \$ 175 $\times 3 = 350$ Date registration is due December 29th | | | | |
| Return check to department head | | | | |
| XRequest Treasurer to mail check with registration | | | | |
| If an advance is requested, attach a completed Johnson County Travel Form. | | | | |
| Deptartment Head Sig | nature: | | | |
| *SEND FORM | TO COUNTY JUDGE'S | OFFICE* | | |
| RECEIVED BY | COUNTY JUDGE'S OFFI | D1111. | | |
| APPROVED BY (| COMMISSIONER'S COUR | T: DATE: | | |
| | | | | |