



# NCRSC Travel Request Form



*(To be completed and then submitted for approval by the NCRSC Administrative Committee – turn in or email to RSC Secretary)*

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

Request Date: \_\_\_\_\_

Area: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Type of travel requested (please check one):**

Out of Region Activity or Event (not budgeted)

Multi Area Activity or Event

Area Level Activity or Event

Assistance at ASC or Sub-Committee

Other (please specify) \_\_\_\_\_

**Event / Activity Information (In order to help us better prepare, please include as much information as possible):**

Event description and type of presentation requested:

\_\_\_\_\_  
\_\_\_\_\_

Date of Event: \_\_\_\_\_

Time of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Anticipated size of audience: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

How much time will be afforded to the presenters for the presentation: \_\_\_\_\_

Does the facility have a white wall or screen and lighting controls to allow for effective A/V Presentations?    Y    N

**How would you generally characterize the audiences overall familiarity with the NA Service System:**

Novice (*New GSRs, General Membership, etc.*)

Intermediate (*Experienced ASC Trusted Servants*)

Advanced (*Serious Service Enthusiasts*)

A Mix Of All Of The Above

**This Section is to be completed by the RSC Secretary**

Date of Administrative Committee funds verification and approval: \_\_\_\_\_

*(Travel cannot be commenced until the Admin Committee has verified adequate funds are available over operating reserves)*

Date Requestor Notified of approval: \_\_\_\_\_

# of Travelers Authorized: \_\_\_\_\_

Names of Authorized Travelers: \_\_\_\_\_