MASSACHUSETTS OFFICE FOR VICTIM A S S I S T A N C E
MO
VA
VICTIM & WITNESS ASSISTANCE BOARD

Massachusetts Office for Victim Assistance 1 Ashburton Place, Boston, MA 02108 (617) 586-1340 - Office

Out of State Training/Travel Request Form

Print Form

Must be submitted 30 days prior to registration or booking travel

Directions:

Pre-approved MOVA awarded funds may be used for out of state skills training for staff. Funds for training are to be used exclusively for developing the skills of direct service providers, including paid staff and volunteers so they can offer quality services to crime victims.

MOVA awarded direct service grant funds cannot be used for management and administrative training of executive directors, board members and other individuals who do not provide direct services.

Training related travel can be covered such as transportation, meals, lodging and registration fees to attend training. Travel expenses will be reimbursed according to the pre-approved budget and are not to exceed your agency's travel policy or the federally approved GSA rates <u>http://www.gsa.gov/portal/content/104877</u>. Grantees are encouraged to look first for available training within their immediate geographical area to minimize travel costs. If needed training is unavailable close by, funds may be authorized for out of state travel.

To use pre-approved funds, please submit the following Thirty (30) days prior to registration/booking. All information is required .								
Grant Fund	Grant Fiscal			Year		Date (MM/DD/YY)		
Agency				Program	n			
1. Agenda and/or coι	urse content for the tr	aining that is be	eing requested	d.	Agenda/Course Cor	ntent is Attache	ed.	
a. Pre-approved budget line for training					e. Lodging Cost	Γ		
b. Pre-approve	l for training			f. Per Diem budget	Γ	/day		
c. Registration Fee								
d. Transportation cost (mileage, airfare, taxi, etc.)				g. Number of Attendees	5			
h. List name of Attendee(s) and position within agency:								
2. Describe how the training will develop skills of direct servic providers.	o the				JL			
3. Please explain wh crime victims canno VOCA support of the why out of state tra	t be offered without ese expenses and							
Requesting Program	Contact Name							
Signature						– Date		
For MOVA use Only								
Approved	O Denied	Comments						
Effective July 2015								