## IN-COUNTY REGISTRATION FORM FOR SEMINAR/WORKSHOP/CONFERENCE

| City of Phoenix                             | REFER TO THE C   | GUIDELINES ON THI<br>(REFER T  |                         | E OF THIS FORM (<br>, 2.281, & 3.41)         | PRIOF               | R TO COMPLETING  |                    |  |
|---|--|--|-------------------------|--|---------------------|--|--------------------|--|
| EMPLOYEE ID EMPLOYEE NAME (LAST, FIRST)     |  | JOB TITLE  |                         |  | DEPARTMENT/DIVISION |  | WORK/CONTACT PHONE |  |
| STEP 1 SEMINAR/WO                           | PRKSHOP/CONFERENCE   |  |                         | STEP 2 TRAIN                                 | NING D              | DATES  | STEP 3             | REGISTRATION COST  |
| TITLE: LOCATION OF TRAINING (city):         |  |  |                         | START:                                       |                     | END: AMOUNT:   |                    |  |
|   |  |  |                         | /  |                     | //   |                    | \$   |
| STEP 4 PAYMENT TYP                          | PE   |  |                         |  |                     | STEP 5 PAYMENT IN  | FORMAT             | TION FOR DIRECT PAY  |
| EMPLOYEE REIMBU<br>Receipts required        | Requires In  | TO VENDOR<br><b>voice</b><br>e card) must be \$50 c  | or more for d           | irect payment to ver                         | endor               | VENDOR NAME and RE   | MIT PAYI           | MENT ADDRESS FROM INVOICE  |
|   | <b>Required supporting</b> thure with training details which inc | ludes cost, location   |                         |  |                     |  |                    |  |
| STEP 6 FUNDING SOL                          | JRCE(s) - CHECK ALL THAT APPLY                                   | AMOU   | NT – IF USII            | NG MULTIPLE FUN                              | NDING               | SOURCES, SPECIFY EA  | CH AM              | DUNT BY SOURCE   |
| EMPLOYEE DEVEL<br>(Allow up to 30 c         | \$   | Send In-County Registration form, with required documentation attached, to Human Resources Department  (Choose one method of submission):  • Mail to HR Connection Center, 251 W. Washington St. |                         |  |                     |  |                    |  |
|   |  |  | • Emai                  |  |                     | ov To ensure delivery, turn  | on the <b>Re</b>   | quest a Delivery Receipt   |
|   |  |  |                         |  |                     |  |                    | s <u>not</u> necessary to follow up with elivery Receipt on your device. |
| DEPARTMENT FUI                              | \$   | For Employee Reimbursement, send an approved Employee Expense Reimbursement form with In-County Registration form, and all required documentation, to City Controller, 251 W. Washington St.     |                         |  |                     |  |                    |  |
|   |  |  | For Direct<br>with requ | t Pay, in SAP the Dep-<br>ired documentation | oartmer<br>which    | nt enters an electronic PCD i<br>must include invoice.   | including 1        | the In-County Registration form  |
| MANAGEMENT D (Allow up to 5 da              | \$   | Send completed Payment Control Document (PCD) with original In-County Registration form, and attach required documentation, to City Controller/Travel, 251 W. Washington St.                     |                         |  |                     |  |                    |  |
| Important: Before your                      | request can be processed; all applic                             | cable sections of this   | s form must             | be filled in, suppo                          | orting              | documentation attache  | d, and h           | ave the required signatures.   |
| Employee<br>Signature:                      |  |  | Date: _                 | //   | 1 -                 | signing, you are indicating that you are in compliance with City of Joenix ARs 2.51, 2.281, & 3.41 |                    |  |
| Department Head or<br>Authorized Signatory: |  |  |                         |  |                     | Date://  | _                  |  |
| Notes:                                      |  |  |                         |  |                     |  |                    |  |

DISTRIBUTION:

ORIGINAL – PRIMARY FUNDING SOURCE
COPY – IF APPLICABLE, SECONDARY FUNDING SOURCE
COPY – DEPARTMENT OR FUNCTION
COPY – EMPLOYEE

|           | For Office Use Only |  |  |  |  |
|-----------|---------------------|--|--|--|--|
| Claim No: | Amount:             |  |  |  |  |

## **GUIDELINES FOR IN-COUNTY REGISTRATION FORM**

Refer to AR 2.51 for information regarding the Employee Development Fund (EDF) program rules and regulations.

Refer to AR 2.281 for information regarding the Management Development Fund (MDF) program rules and regulations.

**Eligible employees below the level of Middle Manager** must use this form to request employee reimbursement or direct payment to a vendor ("Direct Pay") for **in-county seminar/workshop/conference registration expenses using EDF.** 

Executives, Middle Managers, Elected Officials, Boards and Commission members, and volunteers may use this form to request employee reimbursement or direct payment to a vendor ("Direct Pay") for in-county seminar/workshop/conference registration expenses using MDF or Department Funding sources.

## **REQUIRED FORMS AND DOCUMENTATION**

Only use this form for **in-county** seminar/workshop/conference registration expenses including webinars, certification exams, on-line seminars and other types of local, professional development training events.

Complete the top line of personal information on the form.

For Employee Development Funds (EDF), submit requests to Human Resources Department.

For Department Funds, submit requests to Finance. For direct payment to a vendor enter electronic PCD in SAP and for reimbursement to employee, submit requests, using the Employee Expense Reimbursement form, to City Controller.

For Management Development Funds (MDF), submit requests to Finance/Travel.

For more than one funding source, submit original form to the primary funding source and a copy of your request to the secondary funding source. For any portion of the registration fee being paid by employee, submit payment directly to vendor.

All seminars/workshops/conferences must contain an educational component and be job-related.

Complete Steps 1 - 6:

- **Step 1** Enter the title of the seminar/workshop/conference and the location (city) where you will attend this training.
- **Step 2** Enter the training dates of the seminar/workshop/conference.
- **Step 3** Enter the amount of the seminar/workshop/conference registration fee.
- Step 4 Indicate, by checking the appropriate box, if this request is to reimburse employee or to pay the vendor directly ("Direct Pay"). When requesting a "Direct Pay", be sure to pre-register prior to submitting your request for payment and obtain an invoice.
- **Step 5** If this request is a "Direct Pay," enter the payee's name and mailing address.
- **Step 6** Indicate all funding sources and the amounts that apply for this seminar/workshop/conference request. This should equal the amount listed in Step 3.

By signing this form, you are affirming that the information you have provided is complete and correct, and that you have complied with all applicable rules and regulations covered under ARs 2.51, 2.281, and 3.41. **Be sure to sign and date this form and obtain the required approval signature.** 

## WHERE TO SUBMIT YOUR REQUEST

For Employee Development Funds (EDF) – Employee reimbursement (reimbursement to employee), attach required training documentation and all receipts necessary to document proof of payment. For "Direct Pay" (payment to vendor), attach training documentation and vendor invoice, which must include payee and mailing address information. Make pre-registration arrangements as an Invoice is required on all direct payment requests. Submit request to the Human Resources Department – HR Connection Center, 251 W. Washington St., or email via scan to hrc@phoenix.gov or fax to 602-534-1179 (choose one method of submission) contact 602-495-5700 for any questions. When faxing or emailing your EDF request, it is not necessary to follow up with the original paperwork. To ensure delivery of your EDF submission, turn on the Request a Delivery Receipt on your device before sending your email or fax. When any portion of the registration fee being paid out of pocket by employee, then employee is to submit that portion of payment directly to vendor. Keep a copy for your records.

**For Department Funds (DF)** – "Direct Pay" (payment to vendor), the Department enters an electronic PCD into SAP including the approved In-County Registration form, training documentation and vendor invoice, which must include payee and mailing address information. Make pre-registration arrangements as an Invoice is required on all direct payment requests. When any portion of the registration fee being paid out of pocket by employee, then employee is to submit that portion of payment directly to vendor.

For DF Employee Reimbursement (reimbursement to employee) send an approved Employee Expense Reimbursement Request Form (Form 150-11D) with approved In-County Registration Form and required training documentation and all receipts necessary to document proof of payment to City Controller, Calvin Goode, 251 W. Washington Street, 602-262-6555. Keep a copy for your records.

For Employee Development Funds (EDF) and Department Funds (DF) combination – Step 6 allows multiple funding sources. Follow the directions for EDF - A copy of the required documents must be sent to Human Resources for EDF processing (see above For Employee Development Funds (EDF) process). In addition, DF procedures for applicable payment type (Direct Pay or Employee Reimbursement) must be followed for DF processing (see above For Department Funds (DF) process).

For Management Development Funds (MDF) – For Employee Reimbursement (reimbursement to employee) or "Direct Pay" (payment to vendor), send an approved Payment Control Document (PCD) with approved In-County Registration form and training documentation. For Direct Pay, attach 2 copies of vendor invoice, which must include payee and mailing address information. Make pre-registration arrangements as an Invoice is required on all direct payment requests. When any portion of the registration fee being paid out of pocket by employee, then employee is to submit that portion of payment directly to vendor. For Employee Reimbursement (reimbursement to employee) attach all receipts necessary to document proof of payment, submit MDF request to City Controller, Calvin Goode, 251 W. Washington Street, 602-262-6555. Keep a copy for your records.

For Management Development Funds (MDF) and Department Funds (DF) combination – Step 6 allows multiple funding sources. Follow the directions for MDF – A PCD and required documents must be sent to City Controller for MDF processing (see above For Management Development Funds (MDF) process). In addition, DF procedures for applicable payment type (Direct Pay or Employee Reimbursement) must be followed for DF processing (see above For Department Funds (DF) process).