

## Request For Approval For Attendance At Events

Department: \_\_\_\_\_

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

Division \_\_\_\_\_

Title \_\_\_\_\_ Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Event \_\_\_\_\_

Sponsor \_\_\_\_\_

Is the Sponsor an "interested party"? Yes  No

"Interested party" means: 1) any person or entity your institution regulates, licenses or supervises; 2) any grantee or grantor to your institution and any employee, representative or agent thereof; 3) any supplier/vendor to your institution; 4) any advocacy group that advocates or represents the positions of its members to your institution; 5) any organization a majority of whose members fall under 1-4 above.

Is the State official a speaker, panel participant or resource person? Yes  No

Is the sponsor an agency of the federal government, one or more other states or a political subdivision thereof? Yes  No

Is the sponsor a nonprofit organization? Yes  No

If Yes, is the employee or agency a member? Yes  No

Does the nonprofit organization have any contracts with the State? Yes  No

Location \_\_\_\_\_ Date(s) \_\_\_\_\_

Overnight accommodations required? Yes  No

Out-of-state travel required? Yes  No

Estimated total costs? \$ \_\_\_\_\_

### Breakdown of Costs:

Transportation \$

Meals \$

Accommodations \$

Registration Fees \$

Agency to pay costs? Yes  No

Sponsor to pay costs? Yes  No

Employee to pay costs? Yes  No

Other person or entity to pay costs? Yes  No  If yes, note name below:

Reason for attendance:

Will sponsor offer an honorarium or fee? Yes  No

Check:  Copy of invitation letter attached.

Copy of agenda or other description of event attached.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature and Approval

\_\_\_\_\_  
Date

**Note: Any substitutions or changes of circumstances must be reported to your ELO.**

**\*\*\*SPACE BELOW FOR ELO USE ONLY\*\*\***

Attendance approval? Yes  No

**Note: Acceptance of honoraria or fees is not permitted.**

Conditions:

Signature \_\_\_\_\_

Date \_\_\_\_\_

Ethics Liaison Officer

Sponsor is an interested party and employee will be accepting event benefits as a speaker, panelist or resource person. A copy of form will be forwarded to the State Ethics Commission pursuant to N.J.A.C. 19:61-6.4(f).