



MISSOURI RURAL TRANSIT ASSISTANCE PROGRAM

APPLICATION FOR NON-URBAN TRAINING ASSISTANCE FTA SECTION 5311 (B)(3)

GRANTEE (AGENCY) NAME: _____

PERSON/PERSONS FOR WHOM ASSISTANCE IS REQUESTED:

LOCATION OF TRAINING: _____

DATE(S) OF TRAINING: _____ TO _____

ORGANIZATION OFFERING THE TRAINING: _____

DESCRIPTION OF TRAINING: _____

ESTIMATED EXPENSES:

MILEAGE - _____ MILES @ \$.655 PER MILE \$ _____

AIRFARE \$ _____

GROUND TRANSPORTATION (TAXI, SHUTTLE, or UBER) \$ _____

RENTAL CAR AND RENTAL CAR FUEL (IF APPROVED) \$ _____

LODGING \$ _____

MEALS (FULL PER DIEM IN MO IS \$54 PER DAY) \$ _____

CONFERENCE REGISTRATION FEES \$ _____

PARKING FEES (AIRPORT AND HOTEL) \$ _____

OTHER EXPENSES (PLEASE LIST WHAT THEY ARE)
_____ \$ _____

TOTAL ESTIMATED EXPENSES \$ _____

SIGNATURE

DATE

APPROVED BY:

HEATH A. PICKERILL, MISSOURI RTAP MANAGER

DATE