

NAUGATUCK VALLEY

750 Chase Parkway Waterbury, CT 06708

MEMORANDUM

TO:	Lisa Dresdner, Chief Executive Officer		
FROM:	Dean	-	
DATE:		DATE of TRAVEL:	
SUBJECT:	Travel Recommendation		
NAME:		AMOUNT:	

The attached travel authorization is:

- Essential to the continuation of instruction, academic programming, or community service.
- Essential to provide academic or student support services integral to student success.
- Essential to the safe and effective operation of college facilities.

AND

____Was previously approved/authorized.

- _____Is being paid through private or grant funding.
- _____Is being paid through collective bargaining funding / professional development.

____Is being paid through OE.

How will you share knowledge obtained with the campus? _____

Thank you for your consideration.

Dean Signature	Date:			
Dean of Administration Signature	_ Recommended: Yes		Date	
Chief Executive Officer Signature	Approved:Yes	No	Date	•

Travel Recommendation Form 3/21/24