

**MISSISSIPPI JUDICIAL COLLEGE
THE UNIVERSITY OF MISSISSIPPI
OUT-OF-STATE TRAVEL AUTHORIZATION FORM**

Name _____
Office/Position _____
Mailing Address _____
Telephone _____
E-mail _____

Conference Information:

Title of Conference _____
Conference Sponsor **National Judicial College**
Meeting Location **On-line Course**
Dates _____, 20____

Please indicate below the estimated amount of funds that you will be requesting for tuition and conference fee from the Mississippi Judicial College.

Conference Fee*	\$_____
Tuition*	\$_____ (Tuition may be discounted pursuant to NJC and MJC agreement.)
Travel/Airfare	N/A
Lodging	N/A
Mileage	N/A
Meals	N/A
Parking	N/A
Other	N/A
Total	\$_____

* *If approved, the Mississippi Judicial College will authorize the National Judicial College to apply deposited funds directly towards the payment of tuition and the conference fee.*

By signing below, I am requesting prior authorization for out-of-state travel pursuant to Miss. Code Ann. § 25-1-83. I am not requesting that the Mississippi Judicial College reimburse me for travel associated with attending the specified conference.

Signature of Judge

Date

Prior Authorization for Out-of-State Travel:

___ Approved

___ Denied

Signature of MJC Director or Dean

Date