

**Request for Extended Travel**

(THIS REQUEST FORM REQUIRED FOR TRAVEL OUTSIDE OF THE 200-MILE RADIUS)

NAME: Lynn Cole

DATE: 1/31/11

DEPT/BUILDING: Counseling/PHS

PURPOSE:

To attend ASIST Training for trainers  
<http://www.livingworks.net> (ASIST=Applied Suicide Intervention Skills Training)

DISTRICT BENEFIT:

This is a requirement for the grant that Parkrose received. After being trained I will be able to train other staff, administrators, and counselors which will directly benefit our student population in that the staff will be prepared.

TRAVEL DETAILS: 1. DESTINATION: Medford, OR  
 2. TRAVEL DATES: May 22 - 28 2011

<u>ESTIMATED EXPENSES:</u>	<u>DESCRIPTION</u>	<u>COST</u>
• TRAVEL	560 miles @ <del>58</del> 50¢/mile	327.00
• MEALS B-#10 L-#10 D-#15	22 <sup>nd</sup> L+D 28-B+L 23-27 D	120.00
• LODGING	6 nights @ \$60 + tax	396.00
• REGIS/FEEES	includes breakfast + lunch	2600.00
• SUBSTITUTE		—
• OTHER		3443.00

TOTAL: 3443.00

BUDGET SOURCE(S):

Source	Budget Code	Amount
• GENERAL FUND:		
• WORKSHOP FUNDS:		
• CONTRACT REQUIREMENT:		
• OTHER: Grant Funds through Multnomah County		3443.00

TOTAL: 3443.00 District money

mzc 2/7/11

SUPERVISORS RECOMMENDATION AND COMMENTS:

part of grant agreement -  
(details attached)

SUPERVISOR SIGNATURE:

Ana A. Songy

SEND FORM TO SUPERINTENDENT/DESIGNEE:

SUPERINTENDENT/DESIGNEE RECOMMENDATIONS/COMMENTS:

OK K Gray  
3/9/11

BOARD ACTION:

NOT-REQUIRED \_\_\_\_\_ REQUIRED  APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_ DATE: \_\_\_\_\_

I AGREE THAT ALL OF THE INFORMATION ON THIS FORM IS ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE.

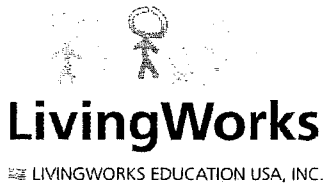
EMPLOYEE SIGNATURE:

[Handwritten Signature]

DATE:

1/31/11





TIN: 20-1416757  
 MAIL: LivingWorks USA  
 PO Box 9607 Fayetteville  
 North Carolina 28311  
 USA  
 TEL: (403) 209-0242  
 FAX: (403) 209-0259

Invoice #IN18597  
 Date 11/12/2010

All sales are final & non-refundable

**Bill to:**

Lynn Cole  
 Parkrose High School  
 12003 NE Shaver Street  
 Portland OR 97220  
 USA

**Ship to:**

Lynn Cole  
 Parkrose High School  
 12003 NE Shaver Street  
 Portland OR 97220  
 USA

503 408 2711

CUSTOMER		SHIP VIA		REQUIRED DATE		TERMS	
n18648						Net 30	
PO NUMBER		TIN / EIN	CURR.	CONSULTANT		ORDER DATE	
			\$USD	Karen Palfreeman		11/12/2010	
QTY ORDERED	DESCRIPTION			UNIT PRICE		EXTENDED PRICE	
	ITEM CODE			DISC	TAX		
1	ASae T4T SVC USD - no slides SN1431			2,600.00		2,600.00	
Thank you for your order. For questions or comments call the number shown above. No refund on materials.							<b>TOTALS</b>
PAYMENT TYPE				SUBTOTAL		2,600.00	
CREDIT CARD							
TRACKING#				Tax			
PAYMENT STATUS Net 30				TOTAL		\$USD 2,600.00	

**INVOICE STATEMENT**

Date (M/D/Y)	Trans#	Ref.	Type	Amount	Currency	Method	CCTrans#
11/12/2010	TR32010	IN18597	Invoice	2600.00	\$USD		
Note: only last 3 transactions are shown				Balance	2600.00		

PLEASE NOTE: International orders may be subject to additional duties and taxes imposed by the destination country. LivingWorks Education cannot determine whether these charges will be billed or not. It is the responsibility of the recipient to pay these fees should they occur. For more information, please check your country's importation laws and regulations.

ASIST T4T Medford OR May 23-27, 2011  
 T19174

IMPORTANT! - Please indicate Invoice# on any form of payment!



# PER DIEM WORKSHEET

Effective Date October 1, 2010

Cole, Lynn

Medford, OR

05/23/11-05/27/11

Traveler Name

Destination (City / State)

Actual Event Dates

Attach this completed form to the Travel and Training Form when per diem is requested.

Go to the following link for government per diem rates or ask your department/office travel coordinator for a list of Federal designated high/low cost per diem locations. [GSA Per Diem site](#)

See Central Accounts Payable MINT Site for more information: [MINT/DCM/Accounts Payable](#)

*Standard Meal Time	Per Diem Rate Table (based on GSA rates)						Other Areas
7:00 a.m.	Breakfast	\$12.00	\$11.00	\$10.00	\$9.00	\$8.00	\$7.00
12:00 p.m.	Lunch	\$18.00	\$16.00	\$15.00	\$13.00	\$12.00	\$11.00
6:00 p.m.	Dinner	\$36.00	\$34.00	\$31.00	\$29.00	\$26.00	\$23.00
	Incidentals	\$5.00	\$5.00	\$5.00	\$5.00	\$5.00	\$5.00
	<b>Total M &amp; IE</b>	<b>\$71.00</b>	<b>\$66.00</b>	<b>\$61.00</b>	<b>\$56.00</b>	<b>\$51.00</b>	<b>\$46.00</b>

\*To calculate meal allowance when traveling by air, rail, or bus subtract two (2) hours from departure time and add one (1) hour to return/arrival time; compare the results to the Standard Meal Time to determine if meal should be included in per diem.

Portland departure time: \_\_\_\_\_ Select AM/PM      Portland return time: \_\_\_\_\_ Select AM/PM

Date	Day of Week	Breakfast	Lunch	Dinner	Incidentals	Totals
5/22/11	Sunday			\$29.00	\$5.00	\$ 34.00
5/23/11	Monday	\$9.00	Provided	\$29.00	\$5.00	\$ 43.00
5/24/11	Tuesday	\$9.00	Provided	\$29.00	\$5.00	\$ 43.00
5/25/11	Wednesday	\$9.00	Provided	\$29.00	\$5.00	\$ 43.00
5/26/11	Thursday	\$9.00	Provided	\$29.00	\$5.00	\$ 43.00
5/27/11	Friday	\$9.00	Provided	\$29.00	\$5.00	\$ 43.00
						\$ -
						\$ -
<b>Grand Total</b>		\$45.00	\$0.00	\$174.00	\$30.00	\$249.00

**The purpose of per diem is to provide a standard allowance for meals and small incidental expenses. Per diem is allowed only when travel requires an overnight stay, per IRS.**

**Notes:**

1. Per diem is authorized for overnight travel & training only. Overnight travel is defined as any trip that requires overnight lodging. See FIN-2 for further details.
2. No receipts are required for per diem allowances.
3. No reduction needs to be made for continental breakfasts, airline meals, or social hors d'oeuvres.
4. An event agenda must be attached to verify if meals are being provided. If the agenda is not available, verification from provider regarding meals must be noted by the Travel Coordinator.
5. Meal per diem includes meal tips and gratuities.
6. Incidental expenses include tips, gratuities, and fees for services such as baggage handlers, bellhops, maids, etc.

**COMBINING PERSONAL TRAVEL WITH COUNTY BUSINESS**      Select: Yes/No

As Travel Coordinator, I have verified that the per diem rate used above corresponds with Federal GSA rates for the destination of the Traveler and the per diem allowed complies with FIN-2 standards.

Bee West  
Travel Coordinator Verification Signature & Phone#

1/28/11  
Date



U.S. General Services Administration

**FY 2011 Per Diem Rates for Ashland / Crater Lake, Oregon**

(October 2010 - September 2011)

Cities not appearing below may be located within a county for which rates are listed.  
 To determine what county a city is located in, visit the [National Association of Counties \(NACO\) website](#) (a non-federal website).

The following rates apply for **Ashland / Crater Lake, Oregon**

Primary Destination* ( )	County ( , )	Max Lodging by Month (excluding taxes)													
		2010			2011										
		Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep		
Ashland / Crater Lake	Jackson County, Klamath County	80	80	80	80	80	80	80	80	80	80	80	80	80	58

\* NOTE: Traveler reimbursement is based on the location of the work activities and not the accommodations.  
 \*\* Meals and Incidental Expenses, see [Breakdown of M&IE Expenses](#) for important information on first and last days of travel.

# Find a Training

Home Trainings May 2011 ASIST T4T

February 2012

November 2011

September 2011

August 2011

June 2011

May 2011

April 2011

March 2011

February 2011

January 2011

December 2010



LivingWorks Education

## Training Details

ASIST T4T

Organizer: LivingWorks Education

Registration Contact:

Name: ASIST Program Coordinator

Email: [asist@livingworks.net](mailto:asist@livingworks.net)

Phone: 403 209 0242

Type: Training

Date: May 23, 2011

Location: May 23-27, 2010 OPEN, Medford, Oregon USA

ASIST Training for Trainers (T4T), 5 day program  
May 23-27, 2011

Ramada Medford and Convention Center  
2250 Biddle Road  
Medford, OR 97504 US

Costs: \$2600.00 USD per person

Please note, your accommodation and travel expenses are not included in the above pricing and are the candidates responsibility.

To register please complete the registration form by following this link to the ASIST T4T pages:

1. Read the Essential Information for Candidate Trainers
2. Read the ASIST Trainer Competencies
3. Choose the T4T and apply online

[http://www.livingworks.net/page/ASIST%20Training%20for%20Trainers%20\(T4T\)](http://www.livingworks.net/page/ASIST%20Training%20for%20Trainers%20(T4T))

## Find a Training

By Location  
By Date

ASIST Workshops

ENGLISH | FRENCH

ASIST T4T

ENGLISH

ASIST TuneUps

ENGLISH | FRENCH

safeTALK Trainings

ENGLISH | FRENCH

safeTALK T4T

ENGLISH

## Programs

### RELATED INFORMATION

[ASIST T4T Overview](#)

[ASIST T4T Schedule](#)

[Essential Information for ASIST Trainer Candidates - ENGLISH](#)

[Essential Information for ASIST Trainer Candidates - FRENCH](#)

[Comments from one ASIST T4T](#)

[Organize or sponsor an ASIST T4T](#)

### ORGANIZER TOOLS

[Set-up checklist for ASIST T4T with 24 candidates](#)

[Set-up checklist for ASIST T4T with 15 candidates](#)

[Set-up checklist for ASIST T4T with 20 candidates](#)

[Set-up checklist for ASIST T4T with 30 candidates](#)

### Already participated in a training?

[Share your experiences](#)

## ASIST T4T Schedule

**PLEASE NOTE:** Candidates must attend all required sessions.

### Day 1

0815-0830 Candidates are welcomed to T4T. Trainer expectations are outlined.

0830-1230 Candidates experience an ASIST workshop as a participant and get to know other candidates through that medium.

1230-1330 Lunch

1330-1630 ASIST workshop continues.

### Day 2

0830-1230 ASIST workshop continues.

1230-1330 Lunch

1330-1630 ASIST workshop continues.

1630-1645 Candidates begin transition to the trainer role. *"Do you want to work toward becoming a trainer of this workshop?"*

### Day 3

0830-1245 Candidates transition to the trainer role. The design of ASIST is presented. Days 3, 4 and 5 of the T4T are overviewed.

1245-1400 Lunch

1400-1700 Candidates are in coaching groups onsite (at the training location) or doing self-study, preparing to present a part of Day 1 of the ASIST workshop.

1730-2030 Candidates continue to prepare to present a part of Day 1 of the ASIST workshop. Those who were in coaching groups in the afternoon are doing self-study. Those who were doing self-study are in coaching groups.

### Day 4

0830-1245 Candidates present those parts of Day 1 of the workshop that they have been preparing for.

1245-1400 Lunch

1400-1700 Candidates are in coaching groups onsite (at the training location) or doing self-study, preparing to present a part of Day 2 of the ASIST workshop.

1730-2030 Candidates continue to prepare to present a part of Day 2 of the ASIST workshop. Those who were in coaching groups in the afternoon are doing self-study. Those who were doing self-study are in coaching groups.



Day 5

0830-1245 Candidates present those parts of Day 2 of the workshop that they have been preparing for.

1245-1345 Lunch

1345-1600 The T4T course is debriefed. Marketing and issues in implementation at the local level are covered.

## RELATED INFORMATION

[ASIST T4T Overview](#)[ASIST T4T Schedule](#)[Essential Information for ASIST Trainer Candidates - ENGLISH](#)[Essential Information for ASIST Trainer Candidates - FRENCH](#)[Comments from one ASIST T4T](#)[Organize or sponsor an ASIST T4T](#)

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[Share your experiences](#)

## ASIST T4T Overview

The *ASIST Training for Trainers (T4T)* course trains persons with existing trainer experience to conduct the two-day [Applied Suicide Intervention Skills \(ASIST\)](#) workshop.

## About ASIST

LivingWorks Education regards suicide intervention in the same way people view "CPR" or basic first aid. Just as "CPR" skills make physical first aid possible, training in suicide intervention develops the skills used in suicide first aid. The two-day ASIST workshop is by far the most widely used, acclaimed and researched suicide intervention skills training in the world. It has been refined since 1983 with feedback from over one million participants and 5,000 active trainers.

## About T4T

The five-day T4T course starts the process of becoming a registered trainer. Individuals learn the content and process of ASIST and the skills needed to conduct it. The course and the ongoing support of LivingWorks provide a cost-effective way to develop suicide intervention competence in your community. The community receives the benefits of local trainers, as well as the advantages of a central agency dedicated to the quality of the program.

During the first two days, candidates participate in ASIST, receiving first-hand workshop experience. The remaining days focus on preparing the individual to conduct ASIST. Candidates must attend all sessions to complete the training. The goal is to register trainers who are competent, confident and enthusiastic. The training ratio is one Training Coach for every five or six candidates. This intensive course balances challenge and support, and provides ample opportunity for practice and participation.

## T4T schedule

**Days 1 and 2:** Participation in the five sections of an ASIST workshop: Preparing, Connecting, Understanding, Assisting and Networking

**Day 3 am:** Transition to the trainer role

**Day 3 afternoon or evening:** Coaching sessions

**Day 4 am:** "Dress rehearsal" of day 1 of ASIST

**Day 4 afternoon or evening:** Coaching sessions

**Day 5 am:** "Dress rehearsal" of day 2 of ASIST

**Day 5 pm:** Course debriefing, issues in implementation at the local level, marketing

## Trainer support

Every registered trainer is fully supported with:

*ASIST Trainer Manual* - the complete reference (300 pages)

*ASIST Organizer Guide* - everything an organizer of ASIST needs to know (24 pages)

Workshop slides - used in presenting the ASIST workshop

Award-winning audiovisuals - designed for and used exclusively with ASIST

Wall posters (2)

Participant handouts - ASIST workbook, Suicide Intervention Handbook, wallet-size reminder card with intervention principles, suicide first aid stickers

*ASIST Trainer Implementation Guide* - how to get started as a trainer (20 pages)

*ASIST TuneUp* - a refresher program for persons who have completed the ASIST X workshop at an earlier time

*suicideTALK* - a complete program for providing awareness presentations

Dissemination materials



This Facility Is Independently Owned And Operated Under A License Agreement With RAMADA.

Ramada & Convention Center - Medford  
2250 Biddle Rd  
Medford, OR 97504  
Phone: (541)-779-3141  
Fax: (541)-779-2623

Date 01/28/2011

Linn Cole  
Please Get Address  
Papalote Museo Del Nino, Mexic, Df 11111  
Mexico

## RESERVATION CONFIRMATION

<b>Reservation number</b>	104118 / 73842058
<b>Arrival</b>	May 22, 2011
<b>Nights</b>	5
<b>Departure</b>	May 27, 2011
<b>Number of adult</b>	1
<b>Number of children 0-12 / 13-17</b>	0 / 0
<b>Guest name</b>	Cole/linn
<b>Group name</b>	Assist
<b>Room type</b>	NK1 1 King/ns
<b>Rate</b>	59.00 Grp Sales Bkng 4-14 Days
<b>Guarantee policy</b>	credit card guarantee
<b>Cancelation policy</b>	cancel by 6pm on date of arrival
<b>Method of payment</b>	XXXXXXXXXXXX9221 / XX-XX



MULTNOMAH  
COUNTY

TO: TRAVELER, NON-COUNTY EMPLOYEE\*\*

SUBJECT: TRAVEL ADVANCE AGREEMENT

I, Lynn Cole, residing at 10427 SE Oak St. Portland OR 97216  
, understand that by accepting a travel advance  
check, I am fully liable for the amount of the advance and agree to submit proper  
receipts in support of this travel advance request. A travel advance check will be issued  
in my name, delivered to me prior to departure, and will be used solely for out-of-town  
travel on official County business as stated below:

County Department traveling for: DCHS/MHASD

Purpose of Travel: ASIST Training for Trainers

Destination (City/State): Medford Actual Event Dates: 05/22/11-05/27/11

Estimated Travel Advance Amount: \$544.00

Non-County Employee Affiliation: Parkrose School District Employee

*Please specify what best describes your affiliation, such as agency name, program name, or company name*

Traveler Telephone Number: 503-799-3807

Traveler Address: 10427 SE Oak St. Portland OR 97216

Where to send advance check (if different from Traveler Address):

I understand that original receipts are required for all approved expenses related to this trip such as lodging accommodations, transportation, registration, telephone, etc.; however, receipts are not required for the per diem allowance.

I hereby agree to submit original receipts related to this trip and refund to the County any excess Travel Advance funds or funds for any expenses for which I fail to provide sufficient backup documentation, within thirty (30) days after completion of the travel.

*Lynn Cole* 3/8/11  
Traveler Signature Date

Approved by Department Director or Designee Date

**Note:** The department must complete this form and obtain the traveler's signature prior to releasing the advance check. The department must submit this original document to Central Accounts Payable with the T&T form requesting the travel advance. All original Trip Settlement documentation to be retained by Central AP.

**\*\* NON-COUNTY EMPLOYEE is described as any person not in Multnomah County Payroll system, i.e., not having a Multnomah County SAP # / Personnel #. Examples of a Non-County Employee would be an Agency Temporary or a Volunteer.**