



City of Mount Vernon

Travel and Training Request Form

Employee Information

- Employee Name: NUCULONIC, JOHN
- Title: DEPUTY COMMISSIONER
- Department: DEPARTMENT OF PUBLIC

Travel Details

- Destination (City/State): WHITE PLAINS, NY
- Purpose of Travel: TRAINING ; NYS CODES
- Conference / Training / Meeting Name: NYS BOC CONFERENCE
- Travel Dates (From – To): 24/25 FEB ; 25/26 MARCH 2016

Travel Justification (Check all that apply)

Please answer the following questions to support the necessity of this travel request:

- **Is this travel a requirement of your job duties?**
 Yes No
- **Is this travel required to maintain a professional license or certification?**
 - Yes No
 - If yes, specify certification/license: NYS BOC CEO [NY0346382]
- **Is this travel required as a result of an audit finding or corrective action plan?**
 - Yes No
 - If yes, identify audit or corrective action plan: _____
- **Is this travel funded by an external source or sponsorship?**
 - Yes No
 - If yes, identify funding source: _____
- **Additional Justification (if applicable):**

Estimated Travel Costs

- Registration / Tuition: \$ 350.00
- Transportation (Air/Rail/Auto): \$ N/A
- Lodging: \$ N/A
- Meals & Incidentals: \$ N/A
- Other (Specify): \$ N/A

Total Estimated Cost: \$ 350.00

Approvals

Employee Signature:  Date: 16 JAN 2026

Department Head Approval: _____ Date: _____

Finance / Comptroller Approval: _____ Date: _____

Mayor Approval: _____ Date: _____

Council President Approval: _____ Date: _____

Submission of this form does not constitute approval. Travel may not be booked until all required approvals are obtained.