

**RTAP GRANT REQUEST FOR EXPENDITURES**  
Fiscal Year 2016

Name of Transit System/Agency	Federal ID Number	
Complete Mailing Address	Phone Number	Fax Number
Name of Person Receiving Training	Phone Number	Fax Number
Email Address		

**TRAINING REQUESTED**

Description of Training (attach announcement)		
Location	Date	Estimated Cost
System Manager Signature		RTAP Coordinator Signature
Date	Date	

Mail request **at least 15 Days prior to the date of training** to RTAP Coordinator. Approval is granted when RTAP Coordinator countersigns this request and sends a copy to the requestor. No new grant requests for current fiscal year will be accepted after September 15.

Mail or fax requests to: Cindy Zolkowski, RTAP Administrator  
Michigan Public Transit Association  
2875 Northwind Drive Suite 120  
East Lansing, MI 48823  
Phone: (517) 324-0858  
Fax: (517) 324-7034  
E-mail: mptacindy@comcast.net

**Note: An expense voucher for eligible expenses must be submitted for reimbursement within 60 days after successful completion of the training activity or the grant request will be canceled and the agency will not be reimbursed for that training. Please inform the RTAP Coordinator if any approved grant requests should be canceled.**