

ASSOCIATION OF COLTON EDUCATORS

CONFERENCE ATTENDANCE REQUEST FORM

NAME: _____

HOME ADDRESS: _____

PERSONAL EMAIL: _____

SITE: _____ CONTACT NUMBER: _____

CONFERENCE: _____

DATE(S) OF CONFERENCE: _____

ACE LEADERSHIP/COMMITTEE POSITION: _____

SUBSTITUTE NEEDED: YES NO

REASON FOR ATTENDANCE: _____

HOW MANY CTA CONFERENCES HAVE YOU ATTENDED: _____

***Please Note:** In order to ensure as many members as possible can attend, you are encouraged to share a room. Please list on form the name of requested roommate. Single room requests must be approved in advance.

(Must be submitted 3 working days prior to conference and/or hotel registration deadlines - requests received after this will not be considered)

Roommate Request Roommate Name _____

Single Room Request

(For office use only)

Approved

Disapproved

Approved with the following condition/s: _____

Signature: _____ **Date:** _____

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CONFERENCE ATTENDANCE CRITERIA AND REQUIREMENTS

1. Must be a member in good standing of the Association of Colton Educators/CTA/NEA.
2. Whenever possible, minority grant for conference must be applied for.
3. Priority will be given to first time participants who have a desire to develop leadership skills which will enhance the Association.
4. Those unit members who are actively involved in the operations of the Association (i.e., bargaining, political action, grievance) will be given consideration to attend conferences directed at their current field of involvement in the Association.
5. Upon completion of conference, attendee will provide ACE a written report of conference including any materials obtained at the conference. Said report may be used in our ACE newsletter. **No reimbursements will be paid out until the report is received.**