**SWAEC REIMBURSEMENT REQUEST Appendix A**

 **FOR CTE PROFESSIONAL DEVELOPMENT ACTIVITIES**

• This activity is above the required 36 professional development hours required for licensure and any professional development hours required by my district. Please Initial \_\_\_\_\_\_\_

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Activity:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Activity:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mark Perkins Performance Indicator most closely associated with this activity:**

• Reading/Lang Arts Academic Attainment • Postsecondary Placement

• Mathematics Academic Attainment • Student Graduation Rate

• Technical Skill Attainment • Nontraditional Participation/Completion

**Mark required or permissive uses of funds associated with this activity: (all that apply)**

• Integration of academic and technical skills

• Linking secondary and postsecondary CTE programs

• Experience in and understanding of all aspects of an industry

• Use of technology in CTE

• Prof development for teachers, administrators and counselors

• Evaluations of Perkins-funded programs

• Activities to prepare special populations who are enrolled in CTE programs

• Involvement of parents, business, or labor organizations in CTE programs

• Career guidance and academic counseling for CTE students

• Local education and business partnerships

• Support for CTE student organizations

• Mentoring and support services for CTE students

• Development of small, personalized career-themed learning communities

• Support for Family and Consumer Sciences programs

• CTE programs for school dropouts to complete secondary education

• Assistance for students in transition to further education or employment

• Training and activities in nontraditional fields

• Other (specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please summarize what new learning or skills this activity provided, how the activity will improve student achievement in your school or classroom, and what kind of support you now need to enhance that achievement:**

**ATTACH RECEIPTS**

**Registration Fee: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parking Fee: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Meals and Lodging: ITEMIZED RECEIPTS REQUIRED**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date | Breakfast | Lunch | Dinner | Lodging | Total Per Day |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**TOTAL FOR MEALS AND LODGING: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mileage: PAID AT CURRENT DISTRICT RATE**

|  |  |  |  |
| --- | --- | --- | --- |
| Date | From | To | Miles |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

 **Total Mileage: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **X District Rate: $. \_\_\_\_ per mile**

 **TOTAL** = **$** \_\_\_\_\_\_\_\_\_\_\_\_

# TOTAL AMOUNT OF REIMBURSEMENT REQUESTED: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby certify that the account presented above is a correct and true statement of travel expenses incurred by me for the activity listed. I understand that in order to be reimbursed, I will not be able to count this towards my 36 required professional development hours for licensure and any additional professional development hours required by the school district.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Did you sign? Did you attach all receipts and copies of paid checks?**

# Send to the attention of Shannon Puckett, CTE Coordinator, 2502 South Main St., Hope, AR 71801

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Approval date: \_\_\_\_\_\_\_\_\_\_\_ by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CTE Coordinator