## Department of Career Technical Education CTSO Sponsor Travel to National Competition Planning Form

The Department of Career & Technical Education congratulates you and your students for qualifying to participate in the national competition(s) for your Career & Technical Student Organization (CTSO). Carl Perkins Career & Technical Education Improvement Act of 2006 Federal Grant funds **may only be used to assist the affiliated chapter advisor to travel with 1st place state winners to CTSO National competitions.** 

Please complete this planning form which will be used to provide you with out of county travel funding. Note that all information and estimates must be provided and completed <u>before</u> funding will be approved. After funding is approved, <u>it is your responsibility</u> to make arrangements for airline and hotel reservations. Work through your school bookkeeper to book flights, hotel and pay registration using the school's purchasing card. We will reimburse the school for approved hotel, flight and registration expenses. Charges for rental cars will not be approved or reimbursed. This form must accompany the Out of County Leave and Travel Expense Report approved by your school administration, with all requested backup information supporting lodging, airfare and registration costs.

Advisor Name Destination (Citv)			School Advisor Home Phone		CTSO Affiliation		Number of 1st Place Advisor Cell Phone Number		
									From (Date)
		Note: Receipt		anning Worl mitted for all ex		t meals an	d mileage.		
Day:	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Weekly Total	
Date:									
<b>Registration:</b>									
Airfare:									
Lodging:									
Breakfast (\$6):									
Lunch (\$11):									
Dinner (\$19):									
Parking:									
Taxi:									
Tolls:									
Mileage (.575):									
Daily Total:									
	Vir Corrige N	omo ( Dhone N	umbor			tol Name			
Air Carrier Name/ Phone Number					Hotel Name/Phone Number				
I understand that it is <u>my responsibility</u> to complete an <i>Out of County Trave</i>					Hotel Address I Leave and Travel Expense Form to be received in the Office of				
				• •				nitted for all expense	

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Teacher Signature

Date

Approved: \_

Rachel Rutledge, Director, CTE

Date