



Conference / Training Request Form

Name _____ School/Site _____

Phone Numbers:

_____ (home) _____ (cell) _____ (site phone)

Email Address:

_____ (home) _____ (site email)

Indicate any previous involvement with CUEA:

List other CUEA, CTA, or NEA conferences you have attended in the last three years:

Why do you want to go to this conference/training?

By attending a conference/training that CUEA is funding full or in part, you agree to share the information you have learned/gathered at the next scheduled Representative Council meeting or another mutually agreed upon forum by the CUEA president before reimbursement of funds will be processed.

Applicant Signature Date

CUEA President Authorization Date