

**APPLICATION FOR CONFERENCE REIMBURSEMENT**

**CONNECTICUT TECHNICAL HIGH SCHOOL SYSTEM ADMINISTRATORS**

Submit form to Barbara St.Onge in Central Office at least 2 weeks prior to registration for conference, seminar, workshop, institute, etc. for approval by the Superintendent or the Assistant Superintendent. The form is then sent to DFAS for the final reimbursement decision.

**GOAL: To Enable CTHSS administrators to grow professionally.**

**NAME:** \_\_\_\_\_  
**HOME ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
City, State Zip

**DATE OF APPLICATION:** \_\_\_\_\_

**EMPLOYEE ID #:** \_\_\_\_\_  
**Collective Bargaining Unit: AFSA Local 61**

**SCHOOL:** \_\_\_\_\_

**POSITION** \_\_\_\_\_

**TITLE OF EVENT:** \_\_\_\_\_

**START DATE:** \_\_\_\_\_

**END DATE:** \_\_\_\_\_

**DESCRIPTION:** (Copy of Conference Announcement or Brochure and other supporting documentation indicating dates and costs must be attached to this request.)

\_\_\_\_\_  
\_\_\_\_\_

**Briefly Explain How This Activity Will Be Applied To Your Administrator Duties:**

(Attach additional page if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**CONFERENCE COSTS \$** \_\_\_\_\_

(Administrator's Signature)

**PRINCIPAL APPROVAL:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

(Applicable to Asst. Principals only)

**Reimbursement** (not to exceed \$1,000.00/school year) may be requested depending on approvals and availability of funds. Verification of attendance and receipts for costs paid are required for all reimbursement requests. Travel Authorization (TA) is required only for Out-of-State travel and must be at no cost to the state. Send completed original form to Barbara St.Onge, PD Consultant at Central Office. (60 days prior to conference/program date). When conference has been approved by the AFSA President, VP and Superintendent or Assistant Superintendent, this original request application will be sent to the attention of Karen Gliha, Div. of Fiscal & Internal Operations (DFIO) for final reimbursement approval and processing.

**APPLICATION REVIEW COMPLETED BY PD Consultant:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**APPLICATION APPROVED BY AFSA President,** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**APPLICATION APPROVED BY AFSA Vice President:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**SYSTEM APPROVAL:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(Superintendent/Assistant Superintendent)

**DFAS APPROVAL:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(Division of Finance and Administrative Services)

**AMOUNT APPROVED BY DFAS \$** \_\_\_\_\_

After Conference completion, administrator MUST submit the following documentation directly to Karen Gliha, Division of Fiscal & Internal Operations (DFIO), State Office Building, Room 309, 165 Capitol Ave., Hartford, CT 06106:

1. Proof of conference registration and expenses paid-in-full receipt(s) (cancelled check(s), credit card receipt acceptable).
2. Certificate of conference completion or conference CEU award.
3. A copy of approved TA if out-of-state travel. Out-of-state travel is considered no cost if union funds cover total costs.

**Instructions for Completing Form CTS-43-Admin**  
**Application for Conference Reimbursement- Administrators**

- Attached is the CTS-43-ADMIN Conference Reimbursement Application for requesting conference approval and reimbursement for conference registration costs.
- Any full or part-time administrator is qualified to request conference registration reimbursement approval.
- The CTS-43 ADMIN **must be completed**, signed by the building Principal (applicable to Assistant Principals only), and sent to Barbara St. Onge in Central Office with conference brochure, announcement or other supporting documentation at least 60 days prior to conference/program start date. If this is an out-of-state conference an approved TA must accompany paperwork. Please be sure to process the out-of-state TA prior to application process as TA's must be approved and have a TA# prior to submission. An out-of-state TA being paid for totally with union funds is considered a "No Cost TA".
- After review for completeness by the PD Consultant, applications will be signed by AFSA President **and** Vice President, the Superintendent or the Assistant Superintendent. Applications will be logged with e-mail verification of receipt sent to applicant. The original application will be sent to Karen Gliha in the Division of Fiscal & Internal Operations (DFIO) in Hartford.
- CTS-43 ADMIN application will be processed by DFIO within the fiscal year (beginning July 1) on a rolling application basis.
- On return from the conference, the applicant must submit directly to DFIO receipts showing cost paid, proof of attendance/certificate of completion. Submit to: Div. of Fiscal and Internal Operations, State Office Building, Room 309, 165 Capitol Avenue, Hartford, CT 06106 Attn: Karen Gliha.
- Upon receipt of the after-conference documentation, the DFIO will direct the completed forms, attachments and reimbursement calculations to the Comptroller for payment within 6-8 weeks.
- Conference reimbursements are mailed directly to your home.

**\* REMINDER \***

- ❖ **Complete CTS-43 ADMIN and forward to Barbara St. Onge, PD Consultant at Central Office in Middletown at least 60 days prior to conference/program start date. For out-of-state conference registrations, a TA must be processed and completed prior to processing paperwork.**
- ❖ **After conference attendance, send registration costs receipt and proof of attendance (certification of completion) to DFIO, Rm 309 Attn: Karen Gliha**
- ❖ **Conference reimbursements are processed for registration costs (receipts required -not to exceed \$1,000/year)**