

**ACT Education/Training/Certification/Conference  
Opportunity Request Form**

I, \_\_\_\_\_, agree to attend the following education/training/certification/conference opportunity:

\_\_\_\_\_ attended from \_\_\_/\_\_\_/\_\_\_ until \_\_\_/\_\_\_/\_\_\_\_\_. (If applicable, Additional Information Attached.)

The cost is \$ \_\_\_\_\_; any receipts/documentation will be submitted for reimbursement after successful completion of the Education/Training/Certification/Conference. I will also provide the ACT Board of Directors of any provided certificate or proof of successful completion, if applicable.

I agree, that by being reimbursed for the costs to attend the above named class/conference requires that I will attend the above mentioned opportunity and share the information learned with the ACT Board of Directors. I also agree, that I may be required to share the information learned with ACT members at an ACT Luncheon/meeting.

I also agree that if the Education/Training/Certification/Conference is not successfully completed, or if I leave my position on the ACT Board of Directors or are no longer a paid member of ACT, the Board of Directors may not approve reimbursement for the expenses.

Reimbursement Request for the following: (Please check all that apply)

- Travel Expenses (Airfare & Transportation –including mileage, toll, cab/bus fares)
- Hotel Accommodation Expenses
- Food & Beverage Expenses
- Registration Fees
- Other: \_\_\_\_\_

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Board Position/Property/Vendor:** \_\_\_\_\_

**Required ACT Board of Directors Signature for Approval:**

Agent for ACT Board Of Directors: \_\_\_\_\_

Position: \_\_\_\_\_

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

\*Reimbursement will be discussed and voted on by the Board of Directors. After approval, the ACT President, Vice-President or Treasurer may sign above.