

**REQUEST FOR OUT--DISTRICT TRAVEL
FOR CATE PERSONNEL**

Name _____ Date _____

School or Assignment _____

Dates of Travel _____

Travel
Destination _____
(City) *(Hotel)*

Name of Conference/Meeting: _____

Room Rate: _____ Room Shared With: _____

Mileage: _____ People Riding in Car: _____

Submitted by: _____

Approved by: _____

Submit to CATE Director two weeks in advance of travel.

Upon approval, the CATE office will forward to you a signed copy of this form.