



EDUCATION FUND EXPENSE REIMBURSEMENT REQUEST FORM

Committee Members

Donald A. Zampa, Chairman
Don Savory, Local Union 155

Personal Information

Name _____ Membership # _____ Phone _____
(Print/Type Name)

Address _____

Current position in the Local: Business Manager ___ Business Agent ___ President ___ Organizer ___
Apprenticeship Coordinator ___ Instructor ___ Executive Board ___
JIW ___ Apprentice ___ Other _____

Education Information

Highest level of formal education completed: _____

List any labor related courses you have previously attended:

Name of class	Organization presenting class	Date Attended	Location
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Local Union Activity Information (attach separate sheet if necessary)

Number of Union Meetings you have attended in the last twelve months _____

Number of phone banks/precinct walks you attended in the last twelve months _____

Date and location of any labor rallys you attended in the last twelve months _____

Have you taken a COMET class _____ yes _____ no

List any other activities you have participated in which benefited your local in the last twelve months:

Class Information/Estimated Costs

Name of Class _____ Organization sponsoring class _____
Location of Class _____ Date of class _____
Cost of class \$ _____ Cost of lodging \$ _____
Air fare (if applicable) \$ _____ Mileage/Parking costs _____ \$ _____
Is the class reimbursable through the International or the Apprenticeship Training Fund? _____

Describe how you will use what you learn in this course to benefit the Iron Workers:

RULES

1. All applications must be submitted and signed by the Local Union Business Manager, Business Agent or President
2. All applications must be received in the District Council of the State of California & Vicinity office at least thirty (30) days prior to the date of the class
- 3. Only applications that have been approved by the Committee and signed by the District Council President in advance will be processed for reimbursement of expenses**
4. Reimbursable expenses are defined as registration fee, required books, coach air fare, room & tax and necessary travel expenses. **Personal meals and expenses will not be reimbursed.**
5. Certificate of completion or other proof of attendance of the class and original receipts must be submitted to the District Council office within fifteen (15) days of the completion of the class.
6. For classes and/or degrees that extend beyond one trip or require home study, receipts and proof of completion of each segment of the class must be submitted within fifteen (15) days of completion of the trip or class segment. A file will be opened and the receipts will be accumulated in the file. Reimbursement will not be made until all coursework is completed and the applicant has received his/her degree.
7. If a class is reimbursable through a program offered by the International or the Apprenticeship Training Fund then the applicant must first submit his/her receipts to those entities and provide the District Council with an accounting.

Applicant by signing this request understands, and agrees to all of the above listed rules.

(Applicant Signature) Dated: _____

Submitted by: _____
Local Union _____ Print name of officer _____ Signature of Officer _____

(For Committee Use Only)

Date Received _____

Approved ____ Not Approved ____

Date _____

Donald A. Zampa, Chairman

