

Full Name: Click here to enter text.Click here to enter text.	
Street Address:	
City ST Zip Code:Click here to enter text.Click here to enter text.Click here to enter text.	
<i>You must be employed by Denton High School or Braswell High School in the Denton ISD to be eligible for travel funds</i>	
<input type="checkbox"/> Denton High School <input type="checkbox"/> Braswell High School	
Travel Start Date: Click here to enter a date.      Travel End Date: Click here to enter text.	
Name of Event (No abbreviations): Click here to enter text.	
Location: (Include City, State, Zip): Click here to enter text.	
<b>Expenses and Funding Sources</b>	
Provide actual EXPENSE amounts	Provide actual FUNDING SOURCES
Airfare: Click here to enter text.	Denton ISD: Click here to enter text.
Car Rental: Click here to enter text.	School: Click here to enter text.
Hotel: Click here to enter text.	Scholarship: Click here to enter text.
Hotel Taxes: Click here to enter text.	Other: Click here to enter text.
Registration/Fees: Click here to enter text.	
Meals: Click here to enter text.	
Other: Click here to enter text.	
Total Travel Expenses: Click here to enter text.	Total Funding Sources: Click here to enter text.
Total Amount Requested: Click here to enter text.	
By signing this document you agree to the best of your knowledge that all information provided is truthful and accurate, and you understand that all information listed in this request is subject to internal audit. Please note that ELLevate! Travel Fund is designed to assist individual teachers is not to reimburse schools or Denton ISD.	
<b>Applicant Signature:</b> _____	
<b>Applicant Printed Name:</b> Click here to enter text.	
For Internal Use Only:	