**POST TRIP REPORT**

|  |  |
| --- | --- |
| CLG Community: |  |
|  |  |
| Conference Attendee Name: |  |
|  |  |
| Name of Training/Conference: |  |
|  |  |

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| --- |
| **CONFERENCE OVERVIEW**  (Provide a Conference Overview) |

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| **Conference Overview** |
| Provide a conference overview here. Include information about the conference in general, what you learned, etc. |

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| **Sessions Attended**  (List each session below and provide information about the session; copy and paste table sections to add to list more sessions): |

|  |  |
| --- | --- |
| Session 1 Title: |  |
| Description: |  |
| Information: |  |

|  |  |
| --- | --- |
| Session 2 Title: |  |
| Description: |  |
| Information: |  |

|  |  |
| --- | --- |
| Session 3 Title: |  |
| Description: |  |
| Information: |  |

|  |  |
| --- | --- |
| Session 4 Title: |  |
| Description: |  |
| Information: |  |

|  |  |
| --- | --- |
| Session 5 Title: |  |
| Description: |  |
| Information: |  |

|  |  |
| --- | --- |
| Session 6 Title: |  |
| Description: |  |
| Information: |  |

(copy and paste tables to add more for more sessions attended)

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| --- | --- |
| CLG Community: |  |
|  |  |
| Conference Attendee Name: |  |
|  |  |
| Name of Training/Conference: |  |
|  |  |

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| **INFORMATION DISSEMINATION TO CLG COMMUNITY**  (Provide a plan as to how the information learned at the conference will be shared with the CLG Community) |

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| **PLAN FOR INFORMATION DISSEMINATION** |
| Provide a plan as to what information and how information will be shared with the CLG Community. |

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| **CONFERENCE TRIP COSTS**  (Please list all Trip-Related Costs here for which attendee is seeking reimbursement) |

|  |  |
| --- | --- |
| Airline Ticket | $0.00 |
| Lodging | $0.00 |
| Parking | $0.00 |
| Mileage | $0.00 |
| Airport Transportation | $0.00 |
| Meals | $0.00 |
|  |  |
| TOTAL COSTS FOR REIMBURSEMENT | $ |

Stipulations for Conference Trip Expenses: Meal costs may not exceed $45/day in total. Mileage is $0.45/mile and is solely for your trip from the CLG Community to airport. Lodging may not exceed the $XX/night + tax rate for the conference. Parking may not exceed $8/day. Airport transportation from Airport to conference hotel may not exceed $40/one way. A receipt must be provided for all trip costs for which the attendee is seeking reimbursement. Expenses will not be reimbursed without a receipt. Travel must be in the most economical manner practical and cannot exceed the total amount established in the Grant Agreement. Reimbursement will be from the State of New Mexico to the CLG Community.

I certify that the above information is to the best of my knowledge and belief, true, accurate, and complete.

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Date: |  |
|  | Signature |  |  |

(Please sign using BLUE INK).