

## Form 504-1 Support for Provincial Competition Application

The Division recognizes that many students bring recognition and honour to their schools, communities and the Division by earning the right to represent the Division at the provincial and/or national level. To this end, the Division will support a portion of the costs of travel for any individual or team earning such a right, to a maximum of \$500 (five hundred dollars) per application.

## CRITERIA

- Applications shall be made in writing to the Superintendent using this approved form.
- The Superintendent shall have the authority to determine and approve eligibility within the terms of this Administrative Procedure.
- Support will be to a maximum of twenty five percent (25%) of the cost of travel, based on current Division transportation costs, regardless of the method of transportation used.
- The intent of the reimbursement is a reimbursement per trip for an event; therefore, multiple individuals cannot make individual claims for a team trip.

## **DEFINITIONS**

- "Provincial or national competition" is defined, for the purposes of this Administrative Procedure, as any
  competition of any kind where the student or team competed as a representative of the school in any kind of
  activity that was officially sponsored by the school as part of its curricular or extracurricular program.
- "Travel" for the purposes of this Administrative Procedure is defined as the costs of providing transportation to and from the destination, including necessary meals, waiting time and accommodation.

## APPLICATION PROCESS

- Complete application using the official application form below.
- The form must be typed or clearly printed.
- Send application to::

Mauricio Reyes, Secretary Treasurer
Clearview Public Schools
5031-50th Street, Box 1720
Stettler, AB T0C 2L0

Email: mreyes@clearview.ab.ca

Support for Provin	icial Competition A	pplication Date:
STUDENT/ TEAM:	Name:	
	Address:	
	City, Province	
	Postal Code:	
	School:	
PERSON MAKING	Name:	
APPLICATION:	Address:	
	City, Province	
	Postal Code:	
	Phone:	
	Email:	
	on Making the App t all information pro	lication ovided in this application is true and complete to the best of my knowledge:
Signature:		
Date:		
Collection of Infor	mation	

Information collected under this form is done so under the provisions of the Education Act and its Regulations, and pursuant to the FOIP Act and Regulations. Information provided will not be shared publicly without the express consent of the Nominee. Information provided is protected under the FOIP Act as personal information.

Please complete in detail:			
1.	What is your relationship to the student/team: (parent,,team coach)		
2.	Competition (event, title), level (provincial, national), location:		
3.	Method of travel and estimate of travel costs:		
4.	Additional information:		

Support for Provincial Competition Application Questions: