

NEA CONVENTION NOMINATION FORM & DELEGATE GUIDELINES
Minneapolis, Minnesota June 29 – July 6, 2018

I understand that **delegates are required to attend ALL pre-convention caucuses and meetings on the convention floor** and that failure to do so will result in a reduction to my final expense reimbursement. (Delegates leaving the convention floor for reasons other than minor conveniences must notify the PWEA President or his/her designee and appropriate team leader.)

initial _____

I understand that I am responsible for an **equal share** of the cost for the hotel room for each designated night of the convention, regardless of emergencies or other personal situations that may require me to arrive late or depart early from convention. **(PWEA will only reimburse one-half the room rate for each delegate).**

initial _____

I understand that I will receive an advance expense check at the pre-convention caucus, scheduled for **Monday, May 14, 2018**. I understand further that I must file my convention voucher, reporting all expenses and accompanied by itemized receipts to PWEA no later than **August 11, 2018**. My voucher must be approved before expenses will be reimbursed. **Itemized receipts are required for all expenses and must accompany the voucher.** Any monies not used for convention expenses must be returned to the PWEA office. **PWEA will not reimburse for alcoholic drinks.**

initial _____

I understand that **only the driver** of his/her personal vehicle will be reimbursed for mileage (roundtrip from his/her home address to their hotel) and tolls. **Parking will only be reimbursed for the driver.** Should a delegate choose to drive to convention, total personal vehicle reimbursement to the driver will not exceed the cost of airfare, as determined by the NEA Travel Agency, FCM Travel Solutions.

initial _____

I understand ground transportation other than to and from an airport (or other terminal of conveyance) will not be reimbursed. Alternate transportation engaged when convention-related transportation is provided will not be reimbursed. Transport purely for personal entertainment/dining purposes will not be approved or reimbursed.

initial _____

I certify that I have read and understand the stated guidelines. Please place my name in nomination for delegate to the VEA Convention.

PLEASE PRINT: _____
 First Name Initial Last Name

Worksite: _____ ID Badge Number: _____

Last 4 Digits Social Security No.: _____ E-mail: _____

Signature: _____ Date: _____

I require dietary accommodations (please specify type needed):

RETURN TO PWEA OFFICE BY FRIDAY, JANUARY 12, 2018, 4:30 PM