

ESSER Grant Close Out Workshop- January 25th

TASBO is so excited to roll out a **NEW ESSER Grant Close-out Workshop!** The ESSER Compliance Workshops offered during the last 2 years included an overview of the ESSER funding sources, program requirements and how to prepare for compliance reviews. Now that ESSER grant funds will end in 2024, it's time to shift our focus to the many issues related to the close-out of the ESSER grants.

This **NEW** workshop will address many important topics such as an overview of end-of-grant activities such as the inevitable funding cliff, disposal of assets and residual supplies, records retention, and so much more. Attendees will have several hands-on and engagement opportunities to develop a process to close-out ESSER grants in their LEA.

TIME: 9:00 AM – 4:00 PM

FEE: \$235 Member | \$285 Non-Member

PRESENTERS: Jeffri Orosco, RTSBA- CFO Elgin ISD, Karen Smith, CPA, RTSBA, CIA- CFO, Cypress-Fairbanks ISD and Natalie Weber- Director of State/ Federal Programs, Elgin ISD

LOCATION: Harris County Department of Education, 6300 Irvington Blvd, Houston, TX 77022

FOOD: Lunch will be provided for all attendees

CEU/CPE Hours: 6/7

Cancellation Policy: Cancellations are only accepted in writing. Cancellations received seven (7) working days before the event are cancelled in full, those received one (1) to six (6) working days before the event are cancelled at 50 percent, and cancellations are not accepted the day of or after the event. If you do not cancel and/or do not attend, you are still responsible for payment. If TASBO cancels an event, you will be refunded in full.

With questions regarding registration, payments, or changes, please email register@tasbo.org.

Register online [at TASBO.org](http://TASBO.org) or return the completed form by:

Mail: 5920 W. William Cannon;
Bldg 1, Suite 200, Austin, Texas 78749

Fax: 512.462.1782

Email: register@tasbo.org (DO NOT email CC info)

<i>Please PRINT clearly.</i>		
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District/Employer (<i>do not abbreviate</i>): _____		
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Payment Method: PO <input type="checkbox"/> _____ Check Enclosed <input type="checkbox"/> Credit Card <input type="checkbox"/>		
Cardholder Name: _____	Daytime Phone: _____	
Card Number: _____	EXP (MM/YY): _____	
Billing Address: _____		
Cardholder Signature: _____		

