

## **ACT208 Managing Special Revenue and State Programs**

Tuesday, April 2, 2024 | 9 AM to 4 PM

Location: Region 1 ESC, 1900 W Schunior, Edinburg, Tx 78541

**Room: Cameron County** 

In-Person Only

EVENT DESCRIPTION: This course provides detailed information to help with managing federal and state funds as well as state programs, with the goal of protecting external funding. Attendees will come away with an understanding of all aspects of Special Revenue and State Program funds including the different types of funds, allowable costs, reporting requirements, and other compliance issues.

This ACT208 Managing Special Revenue and State Programs course will be in-person only. Course materials, including the final exam, will be accessed online. Attendees should bring a device to the training to access the materials. A test will be given for those taking the course for TASBO certification credit.

FEE: \$195 Member | \$245 Non-Member

**Hotel Information:** TASBO does not have a room block at any hotel for this course.

**CEU/CPE Hours**: 6/7 **Prerequisite**: None

**CONDITIONS:** Meeting room temperatures are difficult to maintain; always bring a sweater or jacket to

ensure comfort. Casual attire is acceptable.

About TASBO Events: If you or (someone attending with you) need ADA assistance to participate, please call

us at 512.462.1711.

**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.

## Register online at TASBO.org or return completed form by:

| <b>Mail:</b> 5920 W. William Cannon, Building 1, Suite 200, Austin, TX 78749 | <b>Fax:</b> 512.462.1782 | Email: register@tasbo.org ( <u>DO NOT</u> email Credit Card info) |
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| Please PRINT clearly. Name:  |                          | Title:  |
| District/Employer  |                          |   |
| Contact Phone:   | Email:                   |   |
| Payment Method:  |                          | Che⊕ Enclosed ☐ Credit Card                                       |