



Scottish Rite Learning Center  
of South Texas

## Financial Support For Therapist-in-Training

Please make a copy and retain that copy of all pages of this application.

If the training is to be funded by their employer, this form should be completed by the person who has the authority to make budgetary decisions. By signing this form, the individual indicates the financial support of the training costs for this participant.

1. Does the therapist-in-training live within daily driving distance of the SRLC? YES \_\_\_ NO \_\_\_

2. Will financial support be provided for:

YES \_\_\_ NO \_\_\_ Per diem, housing, and meals?

Out of driving distance: Approximately \$120 per day

Within driving distance: Approximately \$5-\$7 per day

YES \_\_\_ NO \_\_\_ Transportation **over the course of 2 years of training?**

Out of driving distance: Airfare/Mileage for round trips to San Antonio

Within driving distance: Mileage for round trips to SRLC

*Year 1: 15 class sessions during Summer 2026; 4 seminars during 2026-2027 academic year*

*Year 2: 5 class sessions during Summer 2027; 4 seminars during 2027-2028 academic year*

YES \_\_\_ NO \_\_\_ Training Tuition (\$1,000 first year; \$1,000 second year)

YES \_\_\_ NO \_\_\_ Supplies for students? (Approximately \$150 per student over 2 years)

YES \_\_\_ NO \_\_\_ Approximately \$200 to set up a classroom

YES \_\_\_ NO \_\_\_ Registration for 2 self-paid professional conferences, 1 each year (i.e. Austin or Dallas Branch International Dyslexia Association Conference, ALTA Conference, CESD Dyslexia Conference, or another ALTA approved professional workshops)

YES \_\_\_ NO \_\_\_ Approximately \$100 for books, professional and personal course supplies over the 2 year period

Supporter's Signature \_\_\_\_\_ Date \_\_\_\_\_

Supporter's Printed Name \_\_\_\_\_

Position of Signer \_\_\_\_\_ Email: \_\_\_\_\_

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Self Funding by Trainee

I plan to self-support my training.

Trainee Signature \_\_\_\_\_ Date \_\_\_\_\_