Professional Stipend Reimbursement Form

Please fill out this form, attach receipts or other documentation and submit through your dean to the provost by Friday, May 6, 2016. Payment will be made on May 31, 2016.

Name ____________________________________________ Program/School ____________________________________

Describe the professional activity expense(s) for which you are requesting reimbursement.
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Amount requested _______________ ($250 limit, please attach all receipts)

Approval

Dean of School Date

Provost Date

Amount approved _________________

Documentation Guidelines
All receipts, especially credit card slips, must be itemized.

When using personal checks for payment, please provide documentation showing they have cleared. Forms of documentation include: 1) including a copy of the cleared check, both front and back; or 2) a copy of the bank statement that shows the check has cleared. Please note: Your name must be on the bank statement.

Receipts for internet reimbursement need to include your name, vendor name, date and description of the expense.

If no other documentation is available, credit card and bank statements can be used for documentation. However, they must have the name of the vendor and your name printed on the statement.