

St. Lawrence University

CSTEP/McNair

**STUDENT REQUEST FOR REIMBURSEMENT OF
TRAVEL/RESEARCH/INTERSHIP EXPENSES**

Please type or print clearly the information requested below.

Name _____

Conference/Grad School/Internship Name and Location

Conference/Grad School/Internship Dates from _____ to _____

Reimbursement Request Amounts (in keeping with University Travel Policy)

Transportation (airfare, bus, train, car mileage/rental) \$ _____

Meals (# _____ days) \$ _____

Hotel (# _____ nights X _____ per night) \$ _____

Registration or other fees \$ _____

Taxi/bus/shuttle \$ _____

Other _____ \$ _____

Total Reimbursement Requested \$ _____

Documentation: Please attach (by paper clip) all receipts or proofs of payment or other documentation as it applies. Travel Purpose for this Pre-Approved trip (Check the response(s) that fully described your travel purpose.)

Student presented paper/poster

Reimbursement for research/internship meals/mileage/lodging/ticket expenses off campus

Student attended a McNair/CSTEP/discipline/career specific conference

Student visited/interviewed at a graduate/professional school

Other _____

Completed requests are to be submitted to the CSTEP or McNair Office. Reimbursement checks will be sent to your CMR unless you specifically state (in an attachment) where else it is to be mailed. Checks will be sent after request has been made in accordance with University check request policies.