

If you are a graduate student wishing to receive travel reimbursement from the Graduate School please follow the directions below. The Graduate School will award up to \$400 per student; students are entitled to only one travel award per academic year.

1. *Before* traveling to the conference, fill out a travel request form and submit it to the Graduate School along with proof that your paper or poster has been accepted by the conference organizers.
2. Within three weeks after attending the conference, fill out a Travel Expense Reimbursement Form and submit it to the Graduate School along with your original receipts and a copy of the page of the conference program showing your name.
3. If you are receiving additional travel funding from another source in addition to the Graduate School, get the appropriate signatures **before** submitting it to the Graduate School.
4. On the Travel Expense Reimbursement form, check the LUC employee box if you are receiving a stipend or payment from the university and specify on the second page that you would like direct deposit.
5. For the address section, please put your current mailing address or the address that you would like the check mailed to, if that is your preference
6. Incomplete or incorrect completion of the reimbursement form will cause a delay in reimbursement so please double check that you have filled it out correctly, signed it, and included all necessary original receipts.

If you have any questions, please contact:
Camille O'Brien
Graduate School Awards Coordinator
cobrien4@luc.edu



Preparing people to lead extraordinary lives



Preparing people to lead extraordinary lives

Name: _____
 Department: _____
 Campus, Building & Room: _____
 Telephone/Extension: _____

Expense Reimbursement Form:
 For the reimbursement of expenses pertaining to travel and business relating to Loyola University Chicago business.

Period: _____

Total Expense

Advance - Cash _____

Advance - Airfare Pro-Card?

Advance - Lodging Pro-Card?

Advance - Other Pro-Card?

Total Reimbursement due to/from: _____

Reimbursement due to Employee: _____

Balance due to Loyola University: _____

Select a Re-Payment Method

Certification of Expenses: I certify this expense report is a true and accurate accounting of expenses incurred on authorized University or grant approved business. In addition, they are fair charges against Loyola University Chicago and for all expenses chargeable to Federal or State grants, this request excludes alcohol. Amounts not approved or considered excessive by the University are authorized to be deducted.

Requestor Name (print)	Name	Date
Requestor Name (signature)		
Budget Administrator (print)	Ext:	
Budget Administrator (signature)		
Supervisor (print)	Ext:	
Supervisor (signature)		
Sponsored Program Accounting		
Accounts Payable		

Approvals

Accounting Unit	Account	Activity	Account Category	Total Distribution
Total Distribution				

Please return all completed forms including all supporting documentation to: Accounts Payable Department, Lewis Tower, Room 719, Water Tower Campus. Please contact Accounts Payable at extension 5-8750 with any questions.

Comments/Remarks