

Graduate Student Visitation Day Travel Reimbursement Policies

In order to process your travel reimbursement, please read the following BEFORE booking your trip. All questions about reimbursement processing may be directed to Hazel Valdez at metravel@uw.edu or (206) 543-7085.

1. Only students who have traveled more than 50 miles one way may be reimbursed.
2. If you are seeking travel reimbursement but are not a US citizen or permanent resident, please let us know as soon as possible as we will need copies of your passport, visa, and possibly other documents.
3. **Original receipts showing payment has been made in your name** are needed. An email receipt from Orbitz, Expedia, or another site is fine as long as it shows that payment was made. Sometimes, air schedules do not show that payment was made – we need both the itinerary and the “receipt”. Please get a receipt from your hotel when you check out showing that payment was made.
 - a. Copies of receipts, bank statements, or credit card statements cannot be accepted.
4. We can only reimburse the person whose name appears on the receipt, so please don’t have multiple parties pay for multiple parts of your trip. If someone else pays for you, we will need their contact information and Travel Expense Recap Form in order to process the reimbursement. **We will only provide one reimbursement per student.**
 - a. We cannot reimburse for car rental if someone other than the driver/visiting student rented the vehicle.
5. Only admitted students are eligible for travel reimbursement; we **cannot** provide reimbursements for parents, spouses, partners, or anyone else who may be traveling with you.
6. We can only reimburse flights directly from your home city to Seattle and back. If you are flying from a city other than your home city or departing from Seattle to a city other than your home city, you will be reimbursed for a comparable fare for a direct flight. We cannot reimburse mileage points or frequent flyer miles.

Process for Requesting a Travel Reimbursement

1. You will need to complete the below **Travel Expense Recap** form. Please remember to complete the following sections of the form:
 - a) Name, phone number, email, today’s date
 - b) Purpose of trip
 - c) Itinerary and date(s) of expense(s)
 - d) In the Remarks section, your mailing address for your reimbursement check**
2. Please mail your completed form and original receipts to the address below, or give everything to Hazel Valdez during Visit Day. If mailing your materials, we recommend keeping copies for your own records.
 - a. If your receipts and signed Travel Expense Recap Form are not received **within three weeks** following Visit Day, then reimbursement will not be possible.

Thank you,

Hazel Valdez, Fiscal Specialist II
metravel@uw.edu
(206) 543-7085

Mechanical Engineering Building, box 352600
4000 15th Avenue NE
Seattle, WA 98195

TRAVEL Request and Expense Recap Sheet

attach all receipts *except* food

Travel Prior Approval Signature and Date: _____ (sign) _____ (date)

I. Traveler _____ Title (circle one): Faculty /Student /Non-UW
 Phone No. _____ Email Address: _____ Today's Date for Expenses Submission: _____
 Budget No. _____
 PO No. _____

II. **Purpose of Trip** (including city and dates of conference).

III. **Itinerary**

| Departure from (please circle one) <u>UW or Home</u> | Departure Date | Departure Time | to (City) | Lodging name | Business (B) or Personal (P) |
|--|--------------------------|--------------------------|------------------|-----------------|---------------------------------|
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |

Arrival time at home or UW _____

IV.

| Date of expense | Description | Expenses to be claimed: | Amount |
|-----------------|---|-------------------------|--------|
| _____ | <u>CONTRACT AIRFARE</u> (if not, please explain in item VI). | _____ | _____ |
| _____ | <u>CAR RENTAL</u> (if "Enterprise" not used please explain in item VI). | _____ | _____ |
| _____ | <u>LODGING</u> (itemized hotel receipts required), Pls see ** below if claiming an exception | _____ | _____ |
| _____ | <u>REGISTRATION FEE</u> (Completed Registration Form and Receipts must be attached) | _____ | _____ |
| _____ | <u>MISCELLANEOUS EXPENSES</u> (Over \$50, Receipt required) (if no receipt use a Letter of Certification) | _____ | _____ |
| _____ | _____ | _____ | _____ |

Total Claiming Amount: _____

**** Prior Approval required when claiming an exception to maximum lodging:** _____ (Signature and Date)

DO YOU WANT TO BE PAID FOR PER DIEM (food)? **YES** **NO**

ARE YOU CLAIMING MILEAGE office/airport/office? **YES** **NO** (weekend or holiday can claim home/airport/home)

V. **Free meals** (including meals paid by registration fee, please indicate date and for Breakfast, Lunch, or Dinner)

VI. **Remarks**
