**Reimbursement Request**

**TAMIN Travel Award**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ UIN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last First MI

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dept: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Awarded $\_\_\_\_\_\_\_\_\_\_\_ Date by which award was to be used (stated in award letter): \_\_\_\_\_\_\_\_\_\_\_\_

**Instructions for completing Expense Chart**:

In the first column, list each item (i.e. airfare, conference registration) and the cost of each item in the second column. Reimbursement will be made for only the specific items requested on your original application. For example, if you applied for an award to go to one specific conference, you cannot use the money to go to a different conference. ***Reimbursement requests must be submitted within 30 days of the return date.*** **NOTE: Reimbursement will be posted to your student account as a scholarship posting. You will *not* receive a check from TAMIN**. **You must be a currently enrolled student to have an active student account through which this reimbursement is delivered.** *Questions? Contact*: [Coordinator@tamin.tamu.edu](mailto:Coordinator@tamin.tamu.edu)

The award does not reimburse membership fees or any extra-curricular activities during your conference. No reimbursements will be given for travel to meetings prior to the award date. If funds from your research advisor, department, or any other source were applied to your actual expenditures, please list amounts and subtract from your subtotal in table below. Attach to this form:

* A copy of the email sent to you regarding the award amount and approval
* Expense Chart
* All original receipts (Review Rules for Receipts)
* Evidence that you presented at the conference (conference program with your name listed, etc.)

**Sign this form and deliver this form with all receipts/documentation to the Texas A&M Institute for Neuroscience, Interdisciplinary Life Sciences Building, Rm. 3148, 3474 TAMU, College Station, TX 77843 or email a scanned copy of the form with all documentation to [Coordinator@tamin.tamu.edu](mailto:Coordinator@tamin.tamu.edu)**

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Print your name Signature Date

**For TAMIN use only**

Full-Time: \_\_\_\_\_\_ Documentation of approved activities submitted \_\_\_\_\_\_

Amount Awarded $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Account #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Expense Chart**

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| --- | --- |
| **Item Description** | **Cost** |
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| Sub-total |  |
| Subtract funds from advisor or dept applied to these costs |  |
| **Total Amount Requested** |  |