Conference Scholarship
Check Request

How should this check be sent out:
- Mail Out
- Hold For Pickup
- HANDWRITE ($10)

Phone Number (For Pickup)

- Please submit a hard copy of this form to John Demshki's Mailbox in AF 303.
- You must attach all original, itemized receipts for all items in order to be reimbursed. If the receipt shows a balance owed, then you must attach a copy of your bank or credit card statement showing that the charge was paid.
- For ground transportation reimbursement, please include directions to the conference from Chapman University with the total number of miles traveled and use the IRS standard mileage reimbursement.
- Please allow up to three weeks for your check request to be ready for pickup or mail out unless selecting the handwriting option which reduces the amount we will reimburse by $10.

Student Name: ____________________________________________ Date Check Needed: ____________________________

Student ID#: ____________________________________________ Amount of Check: _______________________________

Name of Conference: _____________________________________ Date of Conference: ______________________________

Description of Goods/Services for which the funds are being requested:

<table>
<thead>
<tr>
<th>PAYABLE TO:</th>
<th>Breakdown of Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Registration:</td>
</tr>
<tr>
<td>Student ID#</td>
<td>Transportation:</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>Lodging:</td>
</tr>
<tr>
<td>Email Address</td>
<td>Other:</td>
</tr>
<tr>
<td>Phone #</td>
<td>Total Requested: $</td>
</tr>
</tbody>
</table>

FOR OFFICE USE ONLY:

Director of Finance

Advisor

President

Financial Services

ACCOUNT # 115-6738-69001

SGA ID CODE

BUDGET CATEGORY

OBJECT CODE

AMOUNT APPROVED

DATE RECEIVED