

Candidate Interview Expense Reimbursement

 Name Position Applied For PO Number

 Address to Send Reimbursement

Maximum Total Reimbursement \$750.00 without Presidential approval
Airfare: Actual Cost (coach/business class only)
Auto Rental: Actual Cost Up to \$40.00 per day (2 Day Maximum)
Parking: Actual Cost up to \$20.00 per day (2 day Maximum)
Food: Actual up to \$50.00 per day (2 day Maximum) Itemized Receipts REQUIRED, NO Alcoholic Beverages
Hotel: Actual Cost (1 night Maximum)

Transportation Costs:
 Airfare: _____
 Rental Car: _____
 Private Car: _____ Private Car Mileage: _____
Map attachment is REQUIRED for mileage reimbursement
 Total Transportation Costs: _____

Meals:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Restaurant Name Costs

Itemized Receipts MUST be Attached

Total Meal Expenses: _____

Hotel Expense: _____

 Total Hotel Expense: _____

Miscellaneous Expenses:

 Total Misc. Expense: _____

I hereby certify that the above expenses are true and correct and were incurred in connection with a candidacy for a position at Athens State University. I further certify that the total claimed for travel reimbursement represents all expenses to be reimbursed for the trip, and I acknowledge that it is understood that any travel reimbursement claims received by the Office of Financial Affairs after two months from the date of travel will be disallowed. I also understand that no reimbursement will be made to an applicant who has been offered a position and declined.

Expenses already paid by University:

 Total Paid by University: _____

_____ Signature of Claimant	_____ Date	Eligible Amount: <u>750.00</u>
_____ Signature of HR Representative	_____ Date	Eligible Amount Remaining: _____
_____ Signature of Financial Affairs	_____ Date	Total Itemized Expenses: _____
		Total Eligible Reimbursement: _____