



Conference Grant Reimbursement Form

Name of Conference: _____

Application Number: _____

(Found at the top of the PDF application you were emailed)

Primary Applicant: _____

Name

Signature

Email

Phone

(By signing this form you are verifying that all enclosed receipts and related expenses are valid and fall within the conference funding guidelines)

Validator: _____

Name

Signature

Email

Phone

Cheque to: Primary Applicant Validator

Delivery Information: Pick up at the Members' Services Desk

Mail to: _____



Conference Attendees

By signing this form you are verifying that you attended the conference outlined on the previous page.

Name	Student #	Email	Signature



Conference Expenses

Registration Receipts Description:	Amount
Registration Receipts Subtotal:	
Travel Receipts Description	Amount
Travel Receipts Subtotal:	
Accommodation Receipts Description	Amount
Accommodation Receipts Subtotal:	
Receipts Total:	

Documentation:

- Receipts must show the individual expenses incurred and any included taxes. A receipt showing only a credit card or debit card transaction is not acceptable.

Submission:

- Drop this form and receipts off at the Members' Services Desk in the Students' Union Building.
- Complete paperwork received by Wednesday will be mailed out or ready for pick up on Friday afternoon

For Office Use Only

Date: _____

Receiver: _____

Signature: _____