

INDIANA TECH

Ph.D. in Global Leadership

Student Conference Fee Reimbursement Request Form Academic Year 2018-19

Student Name: _____

Name of Conference: _____

Location: _____

Title of Presentation: _____

Date(s) of Attendance: _____

Amount of Conference Registration Fee: \$ _____

***Please attach documentation providing proof of presentation acceptance as well as a receipt for your conference registration fee.**

***After returning from your conference, you must provide proof of attendance in order for your reimbursement to be processed.**

Student Signature: _____

Date: _____

Electronic Signatures are acceptable.

Please submit completed form and corresponding documentation to the Ph.D. Administrative Assistant for processing.

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Office Use Only

Approved _____ Denied _____

Amount approved: _____

Director Signature: _____

Date: _____

Electronic Signatures are acceptable.