

REQUEST FOR REIMBURSEMENT OF CANDIDATE INTERVIEW EXPENSES

TRAVEL:

Automobile Travel

Round-trip mileage @ .76 cents per mile \$ _____

Mileage - _____

Air Travel or Train

Actual coach fare of candidate \$ _____

(original receipt to be furnished)

LODGING IN CHARLESTON/MATTOON AREA:

Actual expense of candidate
(original receipt to be furnished)

\$ Paid by University

MEALS:

Actual expenses, not to exceed \$63.00 per day \$ _____
(original receipts to be furnished)

TOTAL AMOUNT REQUESTED \$ _____

Candidate Name: _____

Address: _____

Social Security #: _____ EIU Dept.: _____

Candidate Signature: _____

Date: _____

Approval of Dean/Director: _____

Date: _____

NOTE: Submit this form to the appropriate Dean or Director if you have not already requested reimbursement for your expenses. Please attach original receipts.