

TRANSPORTATION REIMBURSEMENT FORM

\$100 Maximum Reimbursement Per Semester/Per Student

Today's Date _____

STUDENT INFORMATION

Name _____ Home College _____

Course Name _____ Professor _____

Student ID No. _____ Semester/Year _____

REIMBURSEMENT INFORMATION

Write check to: _____

Send check to this address: _____

PURPOSE OF TRIP:

Field Trip _____ Internship _____ Other: _____

PLEASE FOLLOW THE INSTRUCTIONS BELOW:

- *Print out each trip's map directions (TEXT ONLY) and attach them to this document.*
- *Miles claimed MUST match map printout - do NOT round or estimate.*
- *Double the "miles to" to get the "roundtrip" miles.*
- *Map printouts must be one way/ use Pitzer as the starting point:*

1050 N. Mills Ave., Claremont, CA 91711

(PLEASE MAKE SURE TO USE MAPQUEST OR GOOGLE
MAPS)

Calculations

Multiply your total distance by \$0.58 (the amount reimbursed per mile) to calculate the total amount you will be reimbursed. Enter your total miles even they exceed the \$100 limit. You will be reimbursed UP TO \$100.

○ **Ex:** 180 miles x 0.58 = \$104

Did you carpool? (Please include the names of all students you carpooled with below. If they are not a Pitzer student, please include their email address):

