ALLEGHENY COLLEGE
Department of Psychology/Neuroscience
Request for reimbursement for comp-related expenses

Note: this form needs to be submitted to the Carnegie Hall Building Coordinator in room 103 for any reimbursement requested. If the department pays an expense directly, (for example, the department buys a test or orders something online for a student’s comp,) then this form does not need to be submitted.

Date of request: ______________________

Student name: ____________________________________________________________

Student ID #: ____________________________ Campus Box #: ____________________

Senior project first reader: ________________________________________________

Department of Comp Project

☐ Psychology  ☐ Neuroscience  ☐ Both  ☐ Other ________________________________

<table>
<thead>
<tr>
<th>Item</th>
<th>Date of expenditure</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total reimbursement requested: ________________________________ $____________

Reason for purchases:

______________________________________________________________

Are receipts for each expense included with this form? _____ yes _____ no

(Please note that receipts are required for reimbursement, and must be paper clipped to form. Please do not staple!)

Sign: ___________________________________________ Sign: ____________________________

Student Comp Advisor

Please do not write below this line. For accounting use only.

______________________________________________________________

Date of Approval ____________________________ Account # ______________________________

Department Approval ________________________________

Updated 11/19