CBWS students are eligible for reimbursement of 100% of travel expenses between campus and their work sites. The maximum amount of transportation reimbursement a student may receive per semester is $416.00.

**FOR TRAVEL ON PUBLIC TRANSPORTATION, USE TABLE 1, BELOW:**

Itemize each portion of your trip on a separate line. Attach all receipts. Only request reimbursement for trips that have already been taken. For example, if you purchase a 10-trip ticket pack and only use 4 tickets during this reimbursement cycle, you may only request reimbursement for those 4 tickets. You may request reimbursement for the remaining tickets as you use them in future reimbursement cycles.

<table>
<thead>
<tr>
<th>Date</th>
<th>Name of Organization</th>
<th>Organization Location: Address, City, &amp; State</th>
<th>Method of Public Transportation (Train, Bus, Trolley, etc.)</th>
<th>Cost $</th>
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**TOTAL REIMBURSEMENT REQUEST FOR TABLE 1:** $________

**FOR TRAVEL IN PERSONAL VEHICLE OR RIDESHARE SERVICE, USE TABLE 2, BELOW:**

*Civic Engagement uses the IRS Standard Mileage Rate of .575 cents per mile to reimburse students traveling by personal vehicle or rideshare. For each trip, record the number of miles traveled and then multiply that number by .575 to calculate your reimbursement rate for that trip. Rideshare trips are eligible for reimbursement for mileage only, not for the full amount charged for a trip. For rideshare trips, include full trip receipts. For trips in personal vehicle, include a map of your route.*

<table>
<thead>
<tr>
<th>Date</th>
<th>Name of Organization</th>
<th>Organization Location: Address, City, &amp; State</th>
<th>Method of Transportation: (Personal vehicle or Rideshare Service)</th>
<th>Mileage Between campus and Organization</th>
<th>Multiply the trip’s mileage by .575 to calculate your reimbursement rate:* $</th>
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</table>

**TOTAL REIMBURSEMENT REQUEST FOR TABLE 2:** $________

**Total from Table 1:** $______ plus total from Table 2: $______ = Total request amount: $______

You must read and sign the reverse side of this form to complete your reimbursement request.
FOR COMMUNITY BASED WORK STUDY STUDENTS

Name of Student: ________________________________________

Check here if you have direct deposit: _____

If you do not have direct deposit, provide: Campus Mail Box #: __________________ OR
US Mail Address: __________________________________________________________

I certify the following:
1. I incurred the above expenses as a student currently participating in the Community Based Work Study Program at Bryn Mawr College. The reported travel expenses are substantiated by the attached, original, itemized receipts which indicate method of travel and amount of payment.
2. No portion of the claimed travel expenses has or will be reimbursed from other sources.
3. Expenses adhere to the College’s travel policy and guidelines. Exceptions to the policy have been approved for the following reason(s) as described below:

Payee's/Traveler's Signature: _________________________________________ Date: _____________________

DEADLINES FOR SPRING 2020

Submit form and receipts to
Civic Engagement in Dolwen, Cambrian Row: Payment Issued:
February 19, 2020 by Noon March 2, 2020
March 25, 2020 by Noon April 6, 2020
April 22, 2020 by Noon May 4, 2020
*May 19, 2020 by Noon June 1, 2020

*Note for May reimbursement requests: In order for the Controller's Office to comply with IRS regulations, students who are graduating or who are completing their post-bac program in May must submit a completed W9 to Civic Engagement with their May 2020 transportation reimbursement request. The IRS W9 form is available online and is also linked on our transportation reimbursement webpage (see below).

CBWS reimbursement requests will not be accepted after the May 19, 2020 Noon deadline.

Questions about CBWS travel reimbursement? See our policies here:
https://www.brynmawr.edu/career-civic/student-funding-and-resources/transportation-reimbursement
Still have questions? Email Ellie Esmond at eesmond@brynmawr.edu