

SSPPS Office of Admissions & Recruitment (SOAR)

IN-PERSON REIMBURSEMENT GUIDELINES

Each student ambassador will be reimbursed for one in-person recruitment event. Additional in-person cost of travel will need to be approved by SOAR. If multiple SSPPS representatives are traveling together, only 1 reimbursement is allowed per type per event. We encourage you take advantage of several virtual recruitment opportunities.

Type		%	What will be reimbursed
San Diego County			
Ground	Personal Vehicle	100%	Mileage
	Rideshare/Taxi	100%	
Outside of San Diego County, but within 2-3 hours driving distance from UC San Diego			
Ground	Personal Vehicle	100%	Gas receipt
Destination cities (traveling ONLY for recruitment event)			
Flight		100%	
Ground	Rideshare/Taxi	100%	To and from airport/recruitment event
Lodging	Friends/Family	N/A	Preferred
	Hotel	100%	1 night max only if no contacts in area & can't depart same day
Destination cities (traveling for other UC San Diego business, and adding an recruitment event)			
Ground	Rideshare/Taxi	100%	To and from recruitment event only
	Rental	100%	1 day max + gas if within 2-3 hours outside of destination city
Destination cities (traveling for personal reasons, and adding an recruitment event)			
Flight		45%	
Ground	Rideshare/Taxi	100%	To and from recruitment event only
	Rental	100%	1 day max + gas if within 2-3 hours outside of destination city

Travel Reimbursement Request Form and Itemized Receipts:

- You must submit Travel Reimbursement Request Form (page 5) to the following people at least **1 month** before traveling depending upon your title:
 - **Students:** Submit to Office of Student Affairs (sspps-studentaffairs@health.ucsd.edu)
 - **Admissions Committee Members:** Submit to Christine (ccartlidge@health.ucsd.edu)
- You must submit itemized receipts for all reimbursable costs incurred to the following people within **7 days** of the event depending upon your title:
 - **Students:** Submit to Jenna
 - **Faculty:** Submit to your administrative support staff member and have them contact Christine for chart string information
 - **Other Admissions Committee members:** Submit to Christine

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Recruitment Travel Reimbursement Request Form

Name: _____ PID #: _____

Year in School: 1: ____ 2: ____ 3: ____ 4: ____

Event: _____

Location: _____

Dates: _____

Lodging Expense: \$ _____

Registration Expense (if applicable): \$ _____

Airfare: \$ _____

Parking Expense: \$ _____

Gas Receipt: \$ _____

Auto Mileage (if within San Diego County): _____

Ground Transportation: \$ _____

Amount Requested from OA: \$ _____

I understand that I must submit an original itemized receipt, showing the amount paid, no later than 7 days following my return from the event.

Signature: _____ Date: _____

OA Use Only

Date received: _____ Approved: _____ Amount: \$ _____

Not approved: ____ Reason: _____

Director of Recruitment: _____

Date: _____