

**THE UNIVERSITY OF AKRON EDUCATION ABROAD
REQUEST FOR INTERNATIONAL FLIGHT REIMBURSEMENT**

On March 6, 2020, The University of Akron (UA) announced the cancelation of all UA-sponsored international travel through May 31, 2020. If you purchased nonrefundable flight tickets in anticipation of a UA-approved program abroad and your program has been canceled, complete this form and attach:

- (1) the receipt from purchase of the flight ticket and**
- (2) confirmation from the airline that you canceled the ticket.**

NOTE: Many airlines are offering flexible travel policies. If you have **changed** to a different flight or have **received credit** from the airline toward a future flight, your flight is not eligible for reimbursement by UA.

Email this completed form and supporting documents to Matt Beaven, University Enterprise Risk Manager (beaven@uakron.edu) with “Reimbursement Request” in the email subject line.

If a third party purchased this flight on your behalf, that individual must complete this form so UA can issue the reimbursement to that individual directly.

Traveler’s last name

Traveler’s first name

Destination(s)

Traveler’s student ID number

Intended departure date

Intended return date

Airline(s)

Flight numbers

Full name of individual who purchased the flight

Email address of purchaser of flight tickets

Complete address to which you are requesting the reimbursement check be mailed

\$ _____
Total reimbursement amount requested

Select the type of program:

UA Faculty-led Program

Direct Enrollment Program

Third-party Program

UA Student Organization Program

Attestation and Agreement

I purchased the above-mentioned flight ticket(s) for the above-named traveler in anticipation of the traveler’s participation in a UA-approved program abroad. I have not changed the flights or requested credit toward future flights. I agree that if I receive a refund from the airline(s) after I have been reimbursed by UA, I will repay UA the refunded amount provided to me by the airline.

Signature

Date

For signatories under eighteen (18) years old, a parent or legal guardian must sign this Attestation and Agreement with a witness.

Parent/Guardian:

Name (Please Print): _____

Signature: _____ Date: _____

Relationship (please indicate parent/guardian)

Witness:

Name (Please Print): _____