

O R I S E

OAK RIDGE INSTITUTE FOR SCIENCE AND EDUCATION

TRAVEL MANUAL
August 9, 2001

ATTACHMENT C-8

SCIENCE AND ENGINEERING EDUCATION PROGRAM _____
INBOUND TRAVEL CERTIFICATE

Complete this form *after* travel to facility, and submit it as directed below within seven (7) working days of arrival at your destination.

Payment for transportation will be sent to you at the address below as soon as possible after our receipt of this form.

TO BE COMPLETED BY PARTICIPANT – (travel payment TO facility site)

TYPE OR PRINT CLEARLY

Name:	SS#:
Mail check to:	
Street Address or P.O. Box:	City, State/Zip Code:

I departed from:	on
(City) (County) (State)	(Date)

I arrived in:	on
(City) (County) (State)	(Date)

The place from which I departed: (check one) <input type="checkbox"/> My home address <input type="checkbox"/> My college address <input type="checkbox"/> Other (please explain):	Mode of transportation: (original receipts must be submitted) <input type="checkbox"/> Bus <input type="checkbox"/> Private car (mileage): <input type="checkbox"/> Plane <input type="checkbox"/> Train <input type="checkbox"/> Taxi, Limo, etc: <input type="checkbox"/> Other:
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I certify that this statement is correct and just and that payment or credit has not been received from any source other than ORISE.

Signature: _____ **Date:** _____

Return to Science and Engineering Education, Oak Ridge Institute for Science and Education, MS-36, P.O. Box 117, Oak Ridge, TN 37831-0117

Attention _____

FOR ORISE USE ONLY Rand McNally = SEE Program Approval: Account Charge: Actual Transportation:	Date: Date: Voucher:
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