



Travel expense reimbursement of invited/dispatched staff members pursuant to the Directive dated 23 June 2015

I. Particulars on the invitee/dispatchee

I undertook travel in response to an invitation or at the request of the University of Göttingen. I hereby request reimbursement of my out-of-pocket expenses itemized below.

Please fill in the fields with coloured backgrounds

Last name:	First name:			
E-mail:	Date of birth:			
Address (private):				
Place of tax office:				
Homeland institute of higher learning:				
Reason for and date of invitation/dispatch:				
Account owner:				
IBAN:	SWIFT/BIC:			
Bank:				
<u>For foreign bank accounts:</u>				
Bank address:				
Routing No.:				
<u>Only to be completed by scholarship recipients dispatched by the University of Göttingen:</u>				
My scholarship provides allowance for material costs and/or travel expenses. Yes <input type="checkbox"/> No <input type="checkbox"/>				
If yes: This allowance has already been exhausted or will soon be exhausted for other purposes. Yes <input type="checkbox"/> No <input type="checkbox"/>				
<u>In the event that a daily allowance was promised:</u>				
Start of outgoing trip (date / time):	End of outgoing trip (date / time):			
Start of return trip (date / time):	End of return trip (date / time):			
I received meals free of charge: Yes <input type="checkbox"/> No <input type="checkbox"/> (e.g. breakfast at the hotel, conference dinners etc.), if yes:				
Date	Breakfast	Lunch	Dinner	Comments (e.g. hotel, outgoing flight, return flight)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If the space provided here is insufficient, please use a separate sheet and attach.				
I dutifully affirm the accuracy of my statements. The original receipts are attached. I declare that, at the time of travel / lodging, I was not an employee of the University of Göttingen:				
Attachments:				
Date	_____ Signature of the applicant			



II. Institutional particulars for reimbursement of expenses incurred by invited/dispatched staff member

1. Personal information and tasks

<input type="checkbox"/> Invitee (incoming)	<input type="checkbox"/> Dispatchee (outgoing)
<input type="checkbox"/> Guest lecture	<input type="checkbox"/> Ext. Commember
<input type="checkbox"/> Project partner	<input type="checkbox"/> Guest
<input type="checkbox"/> Scholarship recipient	
<input type="checkbox"/> Ph.D. Student	<input type="checkbox"/> Student
<input type="checkbox"/> Intern	

- Faculty/institution:
- Reason for invitation / dispatch (including reimbursement granted):
 - see attached document (e.g. invitation / dispatch letter)
 - other reasons:

2. Higher official status of **guest lecturers** (Subsection II of the Travel Expense Directive governing invitees and dispatchees) – *to be completed if the justification and approval of the invitation is not apparent in advance from other documents*

2a) Justification for increased official interest:

2b) Approval by Dean or competent departmental PM member or SUB director

As per previous verbal agreement, I agree that there is an increased official interest in acquiring said guest lecturer

Signature of the Dean or competent departmental PM member or SUB director

3. Funding

This is to certify that sufficient funds are available and, where applicable, a corresponding reimbursement is provided for within the scope of a scholarship or doctoral programme. If the third-party or special funding organisation provides reimbursement options deviating from those laid down in the Travel Expenses Directive dated 23 June 2015, it is hereby confirmed that the reimbursement may be effected accordingly.

Date and signature of cost centre administrator; printed name; telephone number.

4. The following costs are to be reimbursed:

Description	Amount	Currency	Cost account	Cost centre/Order
Train			694 800	
Hotel			694 800	
Private vehicle x €0.20 (km) x €0.30 (with justification)			694 800	
Flight			694 800	
Other costs			694 800	
Per diem payment			694 800	
Remuneration			638 300	
Amount disbursed:				
<input type="checkbox"/> Factually correct	<input type="checkbox"/> Mathematically correct	Receipt no.		
Date, signature	Date, signature			