

FULBRIGHT GUEST LECTURE PROGRAM

REIMBURSEMENT CLAIM FORM (revised 2/7/05)

Name _____ Date _____

Inviting Institution, Department and/or Scholar *(please attach invitation letter):*

Guest Lecture Presentations *(please give approximate figures for undergraduates (u), graduates (g), and faculty (f) in audience):*

Date	Topic	Audience
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Lecture outline/content *(use separate sheet of paper as necessary):*

Rating: Fair Good Very Good Excellent

Audience questions, comments, general response:

Any additional comments *(include candid comments about host institution):*

Travel Itinerary (please attach original receipts for all expenses claimed):

Date	Air/Train/Bus	From/To	Cost (RMB)
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Subtotal _____

Date	Taxi/Airport Shuttle	From/To	Cost (RMB)
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Subtotal _____

TRAVEL TOTAL _____ **RMB**

Lecturer's Signature _____ **Date** _____

Please allow 4 to 6 weeks for electronic transfer of reimbursement payment to the financial institution that you designated on the Direct Deposit Sign-Up Form.

For Office Use Only:

TRAVEL TOTAL _____ USD

_____ days *per diem*. _____ X 10.00 USD + _____

GRAND TOTAL _____ **USD**