

LECOM Bradenton SGA Scholarship Reimbursement Form

Please email this form, a copy of your receipts for reimbursement, and your brief statement to the SGA Treasurer (GStocker08029@med.lecom.edu) and the SGA President (AWolberg98258@med.lecom.edu).

*All reimbursement items must be submitted **NO LATER** than **30 days** after the last day you attended the conference, by 5pm.*

Student Name: _____

Phone Number: _____

Address: _____

Email: _____

Program: _____

Event Attended: _____

Associated Organization (if any): _____

Date(s) of Attendance: _____

Monetary Request for Reimbursement: \$_____

Brief Essay (attach with the form)

In 250-500 words, describe your experience and your participation at the attended event. What have you learned and gained? How has this involvement better prepared you for a future in medicine? Was there anything unique or new that you feel LECOM would be interested in learning? (Note: these are just prompts. Please feel free to direct the essay where you feel appropriate.)

By accepting the scholarship money, you agree to allow LECOM and the SGA to use your remarks in any publications they see fit. Also, if you have pictures from the event, please include them.

Signature

Date