

STUDENT MILEAGE REIMBURSEMENT FORM

The purpose of AHEC reimbursement is to **help ease the financial burden and encourage students** that are interested in completing rotations and/or community service learning opportunities in rural or underserved Southeast Alabama communities. Rotations and/or community service learning opportunities must be completed at a clinical site or organization that is located in a Health Profession Shortage Area (HPSA) or Medical Underserved Area (MUA). In order to determine if your site meets these requirements please use the <a href="https://example.com/HRSA] HRSA designation look-up page. Students may receive reimbursement while funding is available. Students will be notified when funding is no longer available.

Today's Date:						
Student Name (last, first):						
Clinical Site Name:						
Clinical Site Addre	ss:					
Clinical Site Precep	otor Name:					
Rotation Date(s):			Total Number of Hours Completed:			
Date of Travel	Starting Address:		Ending Address:		Round Trip (Y/N)	Total Mileage
Ex. 12/13/2014	123 Virginia Street, Troy, AL 00000		145 Hwy 231S Dothan, AL 00000		Y Y	65
	,					
Total Miles						
To be complete by		Approved by:		Date A	Approved	
AHEC staff		Amount Paid		Date Paid		