Request for Reimbursement for materials from Perkins Funds

Deadline:
All application materials must be submitted to Jamie McCoy, Academic Success Professional, either in person in Millennium Center 1117 or via USPS Postal Service. Deadline for submission in person is 5:00 pm on November 1 during the fall semester or 5:00 pm on April 1 during the spring semester. Application materials sent in the mail must be postmarked by November 1 or April 1 to the address below:

Jamie McCoy, Academic Success Professional
Lincoln Land Community College
5250 Shepherd Road
Box 217, MCTR 1117
Springfield, IL 62794

Requirements:
It is the responsibility of the student to submit the following materials by the deadline in order for a reimbursement request to be considered complete.

- Submit a completed and signed application.
  - signature on the application gives us permission to contact your current instructors about current class standing.
  - students requesting reimbursement must be in good academic standing with all previous and current classes
- Submit all original itemized receipts for items you are requesting reimbursement. Photocopies of receipts are not accepted.
  - receipts must be dated for the same semester that you are seeking reimbursement
- Submit most recent transcript or grades (from most recent semester) from web advisor.
- Submit a current financial aid award letter from web advisor.
  - students may be asked to submit additional materials as needed, including but not limited to tax returns and/or paycheck stubs

Late or incomplete applications are not accepted. Applicants will receive notification of their reimbursement status within 2 weeks of the application deadline.

*Note: Completion of this application does not guarantee reimbursement. Reimbursement will not exceed $300.00.

You cannot request reimbursement for books, fees, tuition, gas, personal physicals or test fees.

For Questions please contact:
Jamie McCoy (217)786-2845 or Linda Chriswell (217)786-2828
Personal Information

Name ________________________________________________________________

Current Address ________________________________________________________

Phone number _______________________________________________________ ☐ Home ☐ Cell ☐ Work

College information

LLCC ID ______________________ Current GPA ______________________

Program/Major _______________________________________________________

Materials for reimbursement (be sure to attach original receipts) ______________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Financial Information

Currently employed (circle): YES NO Place of Employment: __________________________

Current salary? $____________ per ☐ hour ☐ week ☐ month ☐ year

If you are an hourly employee how many hours do, you typically work in 1 week? ______________

List all the people in your household & their relationship to you:

______________________________________  ________________________________

______________________________________  ________________________________

______________________________________  ________________________________

______________________________________  ________________________________
Briefly describe your current life situation and the impact this reimbursement will have on your current situation. (use other side if necessary)

I attest that the statements made on this application are accurate to the best of my knowledge. I understand that this information is subject to verification. By signing this request for reimbursement I am also giving my consent for Jamie McCoy and/or Linda Chriswell to speak with my instructor(s) regarding progress in my class(es).

Student Signature ___________________________ Date ___________________________

OFFICE USE ONLY

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<th>YES</th>
<th>NO</th>
<th>On Time</th>
<th>YES</th>
<th>NO</th>
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<td>If request is denied provide a reason ____________________________________________</td>
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