

Applies to: (examples—Faculty, Staff, Students, etc)

All students enrolled at STLCOP—both undergraduate and professional programs.

Policy Timeline & Overview:

Date Originally Issued: TBD—goal is July 1, 2015

Frequency of Review Needed: Periodically as needed or at least every 5 years

Date of Next Needed Review: by 2020

Date Revised: N/A

Date Re-Approved: N/A

Provide a brief, general descriptive paragraph to overview the policy.

This policy provides general information and guidelines regarding student travel related to educational and/or professional development, what qualifies for reimbursement from the College and how to apply, and the process by which reimbursement is adjudicated and paid.

Table of Contents: (optional; suggested for policies > 8-10 pages)

Not applicable

Definitions:

The Office of Student Services	This office consists of the Director of Professional Student Affairs who reports to the Dean of Pharmacy and oversees student travel reimbursement.
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Educational and Professional Development Fund	A fund that is generated from a specific charge to all students currently enrolled at St. Louis College of Pharmacy called the <i>Educational and Professional Development Fee</i> (formerly known as the <i>Professional Student Activity Fee</i>). This fund is managed by the Office of Student Services with final oversight provided by the Deans.
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Policy Details

I. Introduction

Students are encouraged to participate in academic and/or professional development activities. To promote student participation and make the travel reimbursement process clear, funds for student travel to national, regional, and/or local meetings and/or conferences will be awarded using the procedures outlined in this policy. International travel is subject to the College's *International Travel Policy*. The College's International Travel Oversight Committee (ITOC) makes policy recommendations on and is the final approval body for all international travel involving students.

II. Oversight

The Office of Student Services, consisting of the Director of Professional Student Affairs, will oversee the allocation and management of the *Educational and Professional Development Fund* for undergraduate and professional program student travel, respectively. The Director will work collaboratively to establish an Advisory Committee consisting of faculty advisors for various student organizations with the committee advising the Director on anticipated budget needs for the ensuing fiscal year. The Director reports to the Dean of the School of Pharmacy. Ultimately, the Dean of each school has final oversight of his/her school's *Educational and Professional Development Fund*.

III. Travel Reimbursement Funding Source & Allocation

Funds are generated from a specific charge to all students currently enrolled at St. Louis College of Pharmacy called the *Educational and Professional Development Fee* (formerly known as the *Professional Student Activity Fee*). This fee shall be set by the College's President and Board of Trustees. The monies from this student fee are placed into dedicated roll-over accounts known as the *Educational and Professional Development Fund (Undergraduate Program)* and the *Educational and Professional Development Fund (Professional Program)* for distribution to students attending meetings/conferences for the purpose of academic and/or professional development.

Annual student *Educational and Professional Development Fee* funds will be distributed to the undergraduate program and professional program as follows:

- a. *Educational and Professional Development Fund (Undergraduate Program)* will be funded by students enrolled in the pre-professional program (freshmen – juniors

and seniors not enrolled in the professional program).

- b. *Educational and Professional Development Fund (Professional Program)* will be funded by students enrolled in the professional program (P1 – P4).

Monies in these funds will roll-over annually. The funds will be evaluated at the end of each academic year. If an excessive amount of roll-over monies have accumulated or if a shortage of funds exists, recommendations will be made to the President and Board of Trustees to adjust the *Educational and Professional Development Fee* for subsequent years.

IV. Student Eligibility to Apply for Reimbursement

Students must be in good academic, non-academic, and professional standing to be considered for reimbursement. Students who are in good academic, non-academic, and professional standing, but considered “at-risk” academically (i.e. < C- in one or more courses in which the student is currently enrolled) may be approved for travel funds, but their absence from classes in order to travel may not be approved by the Dean’s Office. In these instances, students will need to weigh the importance of travel against their academic responsibilities. Additionally, students who have exhibited poor academic performance (i.e. received lower than a C) on an Advanced Pharmacy Practice Experience (APPE) may be denied eligibility for reimbursement.

Students must also be in good financial standing with the College at the time immediately prior to receiving reimbursement.

V. Development Activities Qualified for Reimbursement

- Students may be qualified to receive reimbursement for attendance and participation in:
- a. meetings/conferences related to leadership or educational development that are aimed at enrichment of a student’s degree program, including College-recognized social fraternity meetings.
 - b. professional pharmacy organization meetings/conferences including College-recognized professional pharmacy fraternity meetings.

All meetings/conferences will be considered on a case-by-case basis by the Director of Undergraduate Student Services (for undergraduate student travel) or the Director of Professional Student Affairs (for professional program student travel).

VI. Criteria for Awarding Reimbursement

The following criteria must be met by a student in order to receive reimbursement. The student must:

- a. submit a completed *Application for Travel Reimbursement* (Appendix A) to the Office of Student Services at least 30 days in advance of the anticipated travel date.
- b. complete a *Student Travel Agreement & Assumption of Risk/General Release Form* (Appendix B) and all pre-meeting/conference preparation as prescribed by the student organization involved, the faculty mentor/sponsor, and/or the Office of Student Services.
- c. fulfill all obligations of attendance and participation at the meeting/conference as prescribed by the student organization involved, the faculty mentor/sponsor, and/or the Office of Student Services.
- d. be a positive representative of the College and follow the College's Student Code at all times while attending and participating in the meeting/conference.
- e. complete a *Travel Expense Form* (Appendix C), attach all travel-related itemized receipts, and submit to the Office of Student Services within 10 business days after returning from the meeting/conference. Failure to provide accurate documentation may delay your reimbursement. If you are missing or have inaccurate documentation, we will request that via email. If new or updated documentation is not submitted within 45 days post travel, your reimbursement will be forfeited.
- f. submit documentation of all funding from sources outside of the Office of Student Services.

Note:

- For international travel, please follow the College's *International Travel Policy* and consult with the Office of International Programs for criteria that must be met to travel abroad.

VII. Reimbursement Amounts Allowed

The amount of reimbursement available to students will take into consideration the amount of money available and the estimated level of attendance at meetings/conferences from the previous years. The Student Travel Policy is somewhat more restrictive than the Travel Expense Policy managed by the Business Office, the goal of this policy is to maximize reimbursement to as many students as possible in a fair and fiscally-responsible manner.

Students may be reimbursed for travel for up to two (2) meetings per year*. Meetings that fall into Tier A will not be included in this limit, however students will have a total annual reimbursement limit of \$2500 per student for any combination of meetings including those that fall

into Tier A.

Generally, reimbursement includes cost for advanced meeting/conference registration (i.e., early-bird and student member registration rates, if applicable) and for reasonable travel-related expenses (e.g., hotel, coach class airfare, mileage or fuel costs, taxi or shuttle to and from airport)

Examples of Items not eligible for reimbursement include, but are limited to:

- Food and beverage (including alcohol)
- Entertainment activities
- Airport parking
- Luggage fees
- Memorabilia
- Taxi rides other than to and from airport

If the College provides transportation to a meeting/conference (e.g., the College charts a bus), students will not be able to receive reimbursement for alternate travel accommodations unless prior approval is received from the Office of Student Services. Typically the travel tier amount will be reduced by at least half.

The tiers for reimbursement are listed in the table below:

Tiers for Reimbursement

Tier	Who Qualifies	Suggested Reimbursement Levels*
A	<ul style="list-style-type: none">• Participants who represent the College in student competitions held at a meeting or conference (e.g., APhA-ASP Patient Counseling competition, ASHP Clinical Skills competition, ACCP Clinical Pharmacy Challenge)• One elected student leader participating in the APhA-ASP Summer Leadership Institute (SLI)	Full reimbursement for advanced meeting/conference registration and approved travel expenses (see Policy Section VII)

B	<ul style="list-style-type: none"> • Current elected officers (registered in the Office of Student Services) of the specific organization for the given meeting • Meeting delegate (if applicable) • Students serving on a regional or national committee requiring attendance at the meeting/conference • Students presenting research or giving invited presentations 	Full reimbursement for advanced meeting/conference registration plus up to \$300 (depending on available funds) for approved travel expenses (see Policy Section VII)
C	<ul style="list-style-type: none"> • Committee Chairs/appointed positions Chairs for that specific organization • Students that are running for a regional or national office (and complete the election process) 	Full reimbursement for advanced meeting/conference registration plus up to \$200 (depending on available funds) for approved travel expenses (see Policy Section VII)
D	<ul style="list-style-type: none"> • All other students (non-Greek related travel) • President or President Elect of a Greek Organization (Greek related travel) 	Full reimbursement for advanced meeting/conference registration plus up to \$100 (depending on available funds) for approved travel expenses (see Policy Section VII)
G	<ul style="list-style-type: none"> • Students traveling for Greek purposes 	Full reimbursement for advanced meeting/conference registration

*If the College provides transportation, your tier level will typically be reduced by half.

VIII. Misuse or Abuse of the Student Travel Reimbursement Policy

Misuse or abuse of this policy will result in forfeiture of funding and possible ineligibility of future funding. Depending on the severity of the infraction, the incident may be submitted to the conduct and/or professionalism board. (e.g., falsification of documentation, misrepresentation of your actual expenses, student misconduct).

Procedures

I. How to Apply for and Receive Travel Reimbursement
STEP 1:

The student completes and submits an *Application for Travel Reimbursement* at least 30 days in advance of the anticipated travel date.

An online, fillable application form can be found on the Office of Student Services' MySTLCOP portal—go to that MySTLCOP portal to complete and submit an application. A hard copy application form is provided in Appendix A of this policy document to show the specific information needed to complete the online application form.

The Office of Student Services will review the application, including verification of student eligibility. Student applicants who have been approved to receive travel reimbursement will be notified via email about the terms of the reimbursement and will receive a *Student Travel Agreement & Assumption of Risk/General Release Form*.

STEP 2:

The student completes and signs a *Student Travel Agreement & Assumption of Risk/General Release Form* within 10 business days of receipt from the Office of Student Services.

The *Student Travel Agreement & Assumption of Risk/General Release Form* details requirements for meeting preparation and participation along with necessary travel information such as insurance, emergency contact, authorization to seek medical care, and expected standards of conduct during travel (see Appendix B).

Students who do not submit their *Student Travel Agreement & Assumption of Risk/General Release Form* within 10 business days will forfeit their travel reimbursement award.

STEP 3:

The student attends the meeting/conference and complies fully with the terms articulated in his/her *Student Travel Agreement & Assumption of Risk/General Release Form*. The student keeps all travel-related, itemized receipts.

STEP 4:

The student completes and submits a *Travel Expense Form* within 10 days of returning from the meeting/conference along with all travel-related, itemized receipts.

For the *Travel Expense Form* with instructions, see appendix C.

An online, fillable expense form can be found on the Office of Student Services' MySTLCOP portal—go to that MySTLCOP portal to complete the form. Completed expense forms along with travel-related receipts should be returned to the Office of Student Services or emailed to StudentServices@stlcop.edu. A hard copy expense form is provided in Appendix C of this policy document to show the specific information needed to complete the online expense form.

The Office of Student Services will review the submitted expense form and accompanying

travel receipts and confirm that the student complied fully with the terms articulated in his/her *Student Travel Agreement & Assumption of Risk/General Release Form*.

Students will be notified when and where to pick up their reimbursement payment.

NOTES:

- If a student decides not to attend a meeting/conference, he/she must contact Office of Student Services as soon as possible so that the money can be redistributed to other students.
- For international travel, please follow the College’s *International Travel Policy* and consult with the Office of International Programs for procedures related to travel abroad.

Responsibilities

<u>Position/Office/Department</u>	<u>Responsibility</u>
Student Organization Faculty Advisors	<ul style="list-style-type: none"> • Knowledge of the travel reimbursement policy and procedure and ensure that students in the Advisor’s organization are aware of and abide by the policy and procedures.
Office of Student Services (Director of Professional Student Affairs)	<ul style="list-style-type: none"> • Management of the <i>Educational and Professional Development Fund (Professional Program)</i> • Approval of travel for all STLCOP students, including verification of student eligibility • Record keeping of travel reimbursement awarded to students • Annual distribution of the policy to the entire student body and student organization faculty advisors via email • Establish an Advisory Committee
Advisory Committee	<ul style="list-style-type: none"> • Advise the Office of Student Services on anticipated student travel budget needs for the ensuing fiscal year (typically, this committee will meet once/year)
Deans	<ul style="list-style-type: none"> • Final oversight of this policy and the <i>Educational and Professional Development Fund</i>
Business Office	<ul style="list-style-type: none"> • Final approval of travel expense form and verification of good financial standing of the student

Resources (required for any resource referred to in the policy)

Educational and Professional Development Fee

Formerly known as the *Professional Student Activity Fee*. This fee shall be set by the College’s President and Board of Trustees. The monies from this student fee are placed into dedicated roll-over accounts

known as the *Educational and Professional Development Fund (Undergraduate Program)* and the *Educational and Professional Development Fund (Professional Program)* for distribution to students attending meetings/conferences for the purpose of academic and/or professional development.

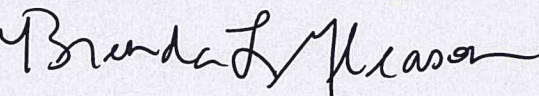
Policy Contacts


Name	Contact Information
Kimberly Kilgore, PhD Dean of Arts & Sciences	Kimberly.Kilgore@stlcop.edu 314-446-8351
Bruce Canaday, PharmD Dean of Pharmacy	Bruce.Canaday@stlcop.edu 314-446-8184
Kilinyaa Cothran, PhD, RPh Director, Professional Student Affairs	Kilinyaa.Cothran@stlcop.edu 314-446-8358

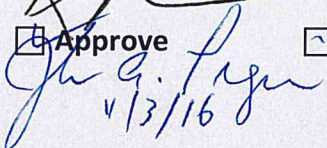
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POLICY APPROVALS

POC: Approve as to Form Do Not Approve
POC Chair Signature: 
Date: 6-28-16

Policy Sponsor: Approve Do Not Approve
Signature: 
Date:

President: Approve Do Not Approve
Signature: 
Date: 4/3/16

Board of Trustees: Approve Do Not Approve Not Applicable
Chair Signature:
Date:

Note: This signature page was taken from the first version of the policy. Policy was updated and approved by Dean Canaday on 8/24/2017.

**APPENDIX A
APPLICATION FOR TRAVEL REIMBURSEMENT**

Student ID number	
Attachments	
First Name	
Last Name	
Year in school	<input type="text"/>
Tier	<input type="text"/> Select the tier that most appropriately fits your travel plans. For more specific information about the tiers, please review the Travel Reimbursement Tier Outline
Tier justification	Explain your tier selection.
Organization associated with travel	<input type="text"/> Select the organization hosting the conference/meeting/event. If the organization is not listed, please select other and describe in the next question.
Purpose of the trip	Please provide details on the conference/meeting/travel
Destination	city/state
Student member registration fee	The dollar amount for the early-bird & student member registration rates if applicable
Departure date	<input type="text"/>
Return date	<input type="text"/>
Lodging arrangements	Name of hotel, address of hotel, and roommates (if known at this time)
Transportation arrangements	<input type="text"/> Please note: if the college is providing transportation, no other transportation options will be reimbursed.
Outside funding sources	<input type="text"/> Will you be receiving any funding from outside sources (eg. grants, fundraisers, student organization)
Source(s) of outside funding (if applicable)	
Outside funding anticipated amount (if applicable)	
Cell phone number	Please provide a contact number in the event there are questions regarding your travel request.

Request acknowledgement	<input type="checkbox"/> By checking this box, I acknowledge that there is no guarantee for funding for my travel. Request will be reviewed by the Office of Student Services and I will be notified with a decision.
International Travel (check only if applicable)	<input type="checkbox"/> By checking this box, I acknowledge that I must consult with the Office of International Programs and follow the College's <i>International Travel Policy</i> . The Office of Student Services will coordinate with the Office of International Programs to award travel reimbursement for attending an international meeting/conference.

APPENDIX B
STUDENT TRAVEL AGREEMENT & ASSUMPTION OF RISK/GENERAL RELEASE FORM

Student ID number	
Attachments	
First Name	
Last name	
Date of birth	
Cell phone number	
Accept Travel Award	<input type="checkbox"/> by checking this box, you are accepting your travel reimbursement award. You are also acknowledging that you understand that funding will only be reimbursed in the event that you follow the Student Travel Reimbursement Policy, the Student Code, and any requirements for the meeting/conference.
Are you driving yourself?	<input type="text"/>
If yes, do you have a valid driver's license?	<input type="text"/>
If yes, do you have valid car insurance?	<input type="text"/> It is required that you have at least state minimum liability coverage on the vehicle you will be driving.
Are you traveling with a faculty/staff member?	<input type="text"/>
If yes, please provide the faculty/staff member's name	
Emergency Contact name	
Emergency Contact address	
Emergency Contact phone number	
Emergency Contact alternate phone number	

Your relationship to Emergency Contact	
Primary Physician	
Primary Physician's phone number	
Health Insurance Provider	
Policy Number	
Group Number	
Known allergies	
Current medications	
Special health needs	
Health Care Authorization	<input type="checkbox"/> By checking this box, I authorize STLCOP to obtain appropriate health care for me in the event that I need it but am unable to obtain it for myself. I further agree to hold harmless and indemnify STLCOP for any and all actions taken by STLCOP to provide necessary emergency medical care to me during the activity/program. I also understand and agree that if I experience serious health problems, suffer an injury, or am otherwise in a situation that raises significant health and safety concerns, then STLCOP may contact my parents or any other person whose name I have provided as my "emergency contact."
Risks of Travel	<input type="checkbox"/> By checking this box, I understand that my participation in the activity/program risks traveling to and from the activity/program. I understand that STLCOP does not represent or act as an agent for, and cannot control the acts or omissions of the activity/program sponsor or host, transportation carriers, tour organizers, or other providers of food, goods or services involved in the activity/program. I understand these risks and assume them knowingly and voluntarily so that I can participate in the activity/program.
Standards of Conduct	<input type="checkbox"/> By checking this box I acknowledge that I recognize that I assume an important personal obligation to conduct myself in a manner compatible with local laws and regulations, with STLCOP's policies and standards of student conduct, and the rules and requirements of any sponsor or host of the activity/program. Additionally, I agree that I will not participate in high risk activities during this trip such as, but not limited to, sky diving, bungee jumping, scuba diving, surfing, rock climbing or any other high risk activity. I assure the College that I will act responsibly, and I agree that I will become informed of, and will abide by, all applicable laws, regulations, policies, standards, rules, and requirements.
General Release	<input type="checkbox"/> By checking this box, I acknowledge that knowing the risks described above, I agree, on behalf of myself, my family, my heirs, and my personal representative(s), to assume all the risks and responsibilities surrounding my travel and participation in the activity/program. To the maximum extent permitted by law, I release, hold harmless, covenant not to sue, and agree to indemnify STLCOP, and its officers, governing board members, faculty, staff, representatives, employees and agents ("Released Parties"), from and against any present or future claims, losses, liabilities, costs and expenses for any loss, damage, illness, injury or death to person or property, or for any other damage,

which I may suffer, or for which I may be liable to any other person, related to my participation in the activity/program resulting from any cause, including but not limited to negligence on my part or the part of the Released Parties.

Electronic Signature

By checking this box I am electronically providing my signature, and I certify that I am age 18 or older and a student of St. Louis College of Pharmacy ("STLCOP"). I have chosen to voluntarily participate in academic and/or professional development activities and acknowledge that participating is not required to receive my degree. I have carefully read and freely signed this Student Travel Agreement & Assumption of Risk/General Release Form. I understand and agree that no oral or written representation can or will alter the contents of this document. I agree that this agreement shall be governed by the laws of the State of Missouri (excluding its conflict of laws principles), and that the state or federal court for St. Louis County, Missouri shall be the forum for any lawsuits filed under or incident to this agreement.

**APPENDIX C
TRAVEL EXPENSE FORM**

INSTRUCTIONS

1. Fill out form below according to the specifications listed.
 2. Attach itemized receipts that show proof of purchase (i.e. Charged to VISA ****9999)
 3. Print, sign, and turn into the folder outside Erin Boswell's office in the Success Center (1st floor Res. Hall)
- Please note: If you are missing documentation you will receive an email. If you fail to provide the documentation, you will forfeit your reimbursement on those travel expenses.*

STUDENT TRAVEL EXPENSE FORM

Name _____
 Student Organization _____
 Destination _____
 Event _____
 Date(s) of Travel _____
 Tier Approved For (circle one) A B C D G

Travel Expenses	Specifications
Registration Fee	Early-bird registration only
Transportation	Airplane, bus, train, or rental car - include only your portion of the expense*
Hotel Room	Include only your portion of the expense**
Taxi	Transportation between airport and hotel is the only approved taxi expense
Parking (in hotel)	Hotel parking only - include only your portion of the expense***
Gas OR Mileage****	If choosing gas, include receipts. If choosing mileage, include a map print out of your trip from STLCOP to conference hotel. Attach printout with receipts. Calculate mileage below.
Total Expenses	0

Please list all of the students who split the cost of the following expenses (if applicable):

*rental car: _____
 **hotel room: _____
 ***hotel parking: _____

Mileage Calculation Miles driven (per specifications) x .55 (current mileage rate) \$ -

Student Signature _____
 Advisor Signature _____

STUDENT SERVICES APPROVAL

Registration Expense
 Tier Reimbursable Expense
 Balance Due to Individual

Kilinyaa Cothran _____

Erin Boswell _____