

Child Care Support During Travel Expense Reimbursement Application Form

Name _____ Empl/Student ID _____
Department _____ Campus Email _____
Position (title) _____ Campus Phone _____
Status Faculty Staff Student

Event associated with request:

Description of Event: _____

Date of Activity (begin/end): _____

Role in Activity (presentation, panel organizer, researcher, etc.): _____

Dependent information

Name _____	Age _____	Relationship to applicant _____
Name _____	Age _____	Relationship to applicant _____

Schedule and cost of Child Care and/or Dependent Travel and Accommodation Costs
(Attach child care schedule if per day cost varies. For airfare/accommodation reimbursement, attach receipt/boarding pass)

Number of days traveling: _____ Child Care Cost per day: \$ _____

Total reimbursement amount requested: \$ _____

Travel Authorization: Signature of Faculty Advisor/Supervisor/Department Chair

Signature _____ Date _____

Employee/Student Signature:

Signature _____ Date _____

Child Care Support During Travel Expense Reimbursement Acknowledgement

I acknowledge that this request is subject to the following conditions:

- Reimbursement payments will be made after the professional travel is complete.
- The amount of annual reimbursement is limited to \$1,200 per person in a fiscal year.
- Reimbursements are a taxable benefit.

Important program information is summarized on page 2 of this form.



**CASE WESTERN RESERVE
UNIVERSITY**
Department of
Human Resources

Child Care Support During Travel

General Requirements:

1. Reimbursement is available only for dependent care expenses incurred when traveling to attend professional meetings, conferences, workshops, and professional development opportunities.
2. Only expenses incurred for an “eligible dependent” are reimbursable. An eligible dependent follows Internal Revenue Service definitions. In general, an eligible dependent must be 18 and under.
3. Effective January 1, 2024, child care expenses incurred while traveling may be reimbursed up to \$100 per day (domestic travel) or \$150 per day (international travel). Each person is limited to reimbursements totaling \$1,200 per fiscal year.
4. The reason for travel must be substantiated and authorized by:
 - a. Department Chair for faculty members
 - b. Supervisor for staff employees
 - c. Faculty Advisor for students
5. The anticipated schedule of necessary child care must be identified.
6. An application form must be submitted for each trip that results in incremental child care costs.
7. Documentation of travel/accommodation costs must be provided (excludes itineraries/schedules; includes actual receipts/boarding passes) or daily schedule and cost of child care must be listed on reimbursement form.
8. Reimbursement will occur after the application form and appropriate expense and travel documentation are reviewed and approved by Benefits Administration.
9. Application forms and appropriate documentation should be submitted via Box, using [Ask HR Box](#), email at askHR@case.edu, or by hand delivery to: HR Service Center – 320 Crawford Hall