



Please complete all applicable fields and submit to ap@cvre.org.
To be read in conjunction with instructions on **page 2**.

Participant/Payee Information

Visit number/Visit date/Description (i.e. Week 4)	# of visits	Unit Cost	Cost Ext.
		Subtotal	

Visit number/ Visit date/Description (i.e. Week 4)	Total Miles (R/T)	Cost per mile	Cost Ext.
		Subtotal	

Description		Cost Ext.
	Click to Attach documentation Subtotal	

Total	
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Is expenditure in accordance with study approved justification? Yes No

Date _____

Date _____

Prior to first participant request on a new study please submit the following forms to admin@cvre.org:

- *Authorization for Use and Release of Individually Identifiable Health Information Collected for VHA Research*
- *Research Consent Form*

Research Participant Form Instructions:

Enter Participant Name and address

Fund Acct # & Name: Enter CVRE fund account number and fund short name

Participation:

- Outline the visit details for the stipend: Visit number, date, visit type and/or description.
- Enter the number of visits and cost for each visit.
- The form will automatically calculate the cost extension and Subtotal.

Travel:

- Outline the visit details for the travel reimbursement: Visit number, date, visit type and/or description.
- Total Miles (R/T): Enter the number of private car miles (round trip) to be reimbursed and the form will calculate the dollar amount by multiplying the number of miles by the current mileage reimbursement rate.
- The form will automatically calculate the cost extension and Subtotal.
- Attach an internet map (Yahoo, Google) showing miles traveled and a map from starting point to destination.

Other:

- Outline the details for the miscellaneous items to be reimbursed: Visit number, date, visit type and/or description.
- Attach original documentation for reimbursement i.e. parking receipts.

Is expenditure in accordance with study approved budget justification?:

- check the box "Yes" or "No"

Requestor & PI Signature & Date: Sign and date form

Submit form to ap@cvre.org ensuring email is **encrypted**.