

New Asia College
The Chinese University of Hong Kong

University College Joint Scheme for Teachers-Students Interaction

Reimbursement Application Form

(Please submit the application to Ms. Winnie Lam, College Office, New Asia College)

Applicant's Name: _____ Staff I.D.: _____

Post: _____ Department: _____

Email address _____

Payment: Direct credit to _____ (name of payee)

Name of Bank _____

Account No. _____

Date of meal: _____ Lunch Dinner

Venue: _____

Total expenses claimed: \$ _____

Total no. of people present: _____

Participants List:

Name	*New Asia students	*Non-New Asia students	Other categories (please specify)

**please tick (✓) select the appropriate one.*

I certify that the above information is correct and the meal expenses are in compliance with the "Guidelines for the Use of Fund from University-College Joint Scheme for Teacher-Students Interaction".

Signed: _____

Date: _____