

Community-Based Learning: Claim Form
Module Code: CMDV302

Name of Student.....Student No.....

Transport

Date of Journey	Destination	Signature: Organisation/ Community	Signature: Academic Module Facilitator	Bus/Taxi fare (one way)	Total cost

Community Project Expenses

(Compensation for such expense is subject to the availability of funds. Prior approval must be obtained from the academic co-ordinator before any expenditure requiring a refund is made).

Date of purchase	Nature of purchase	Purpose	Approved Module co-ordinator's signature	Amount claimed (R) (Attach receipt for purchases)

Student's signature..... Date of claim.....

School of Social Work and Community Development
Howard College Campus, UKZN