

Date

To Whom it May Concern:

This letter is in support of Student Name, MS4 receiving travel reimbursement for presentation of her scholarly project at an upcoming conference. This student is eligible for reimbursement because she is enrolled as a full-time student at MCW-Milwaukee and has yet to receive travel reimbursement for the presentation of this project. Her contributions to this project included literature and chart review and data collection and analysis. She also wrote the project abstract and manuscript. She is the only student involved in this project. The Department of Plastic Surgery will not be providing any reimbursement funds to the student in relation to this project.

The contact information for the department staff person who processes travel reimbursements is: Name here (email@mcw.edu).

Sincerely,

Signature of faculty mentor
Title & department