

# Walk for Autism – Charleston

## ABA Scholarship Reimbursement Procedures

Please submit documentation for reimbursement **US MAIL ONLY** to:

Walk for Autism-Charleston  
Rose O'Neal, controller  
2551 Midland Park Rd, Box 84  
Charleston, SC 29406-4558

### **For Monthly Therapy Expense Reimbursements:**

Submit monthly time sheets for therapy hours worked. The following information is required:

- Name of Child
- Name of Therapist
- Address of Therapist
- Dates and times the therapy services were provided to the child
- Check number(s) relating to payment
- Time sheets **MUST** be signed by both therapist and parent to verify accuracy.

**Documentation of payment required with your time sheet. Submit monthly copies of 1) the canceled check both front and back or 2) copy of money order with therapist name as recipient, dates of service and dollar amount which coincides with therapist time sheet.**

### **For ABA Consulting Expense Reimbursement:**

Submit an Invoice for Consulting Services. The following information is required:

- The name of the child being served
- The name and address of the consulting firm
- Itemized listing of services provided
- Dates of Service
- Check number relating to payment

**Documentation of payment required within 30 days after sending in your time sheet i.e., July proof of payment can be submitted with August time sheet/s.** Submit a copy of the 1) the canceled check or 2) the bank statement showing payment which corresponds to the amount on the invoice.

### **General Guidelines Regarding Scholarship Reimbursement:**

1. Time sheets should be received by the 10<sup>th</sup> of each month. Reimbursement checks will be written by the 15<sup>th</sup> of each month and mailed on the 1<sup>st</sup> business day after the 15th. During holiday or vacation periods an email notification will be sent for any change in this schedule within 7 days of the new payment date.
2. No cash payments will be reimbursed.
3. All documentation needs to originate from parents/guardians. No paperwork will be accepted from therapists or other 3<sup>rd</sup> parties.

### **Scholarship Awards**

You will receive either email or written notification regarding your **scholarship award, a copy of these procedures, and time sheets** approximately 60 days preceding the Event. Scholarship awards will be administered as 12 monthly reimbursements. You may submit for a reimbursement above the minimum monthly award. However, any unused portion of your minimum monthly award will return to the organization. If there are any exceptions to this, the attached Request for an Appeal, can be submitted.

I have read and understand the procedures stated above. (Submit signed copy with application.)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date