YALE UNIVERSITY
GRADUATE SCHOOL OF ARTS AND SCIENCES

TRAVEL HEALTH CERTIFICATION
FOR DISSERTATION RESEARCH TRAVEL

Date: ____________________________

The Graduate School has created a fellowship that provides Ph.D. students working on their dissertation with support for the cost of inoculations and drug prescriptions at Yale Health that are required for travel outside the United States.

Students will receive a credit on their bursar account once they obtain certification from the DGS and from the Travel Clinician. **Students must bill their Yale Student Account in order to receive reimbursement.** Students must provide copies of receipts and/or copies of invoices for both the travel prescriptions, which must include the name and cost of the prescription, and the travel health charges in order to be reimbursed for those costs.

I certify that ____________________________ a Ph.D candidate enrolled in (Student Name)

the ____________________________ Program Department needs to travel

to ____________________________ for dissertation research

(Country)

from _____________ to ________________ .

(Date) (Date)

Department DGS (signature) ____________________ (Date) __________________

Travel Health Charges: *(must provide backup documentation, such as copies of invoices obtained via Yale Health)*

$ __________________

Prescription Charges *(must provide receipts that show the prescription name and cost, such as the sheet included with your prescription)*

$ __________________

TOTAL:

$ __________________

Return the completed form to:
Graduate School of Arts and Sciences, Financial Aid Office, 246 Church Street, Room 208, New Haven, CT 06520 or via email at gradfinaid@yale.edu