



**GEAR UP Southern West Virginia 2022-2023**

**Matching Documentation/Reimbursement Request**

To document a matching activity or to request reimbursement, complete and print the following and submit *with appropriate documentation* in your monthly submission.

**I. Name of Event/Activity/Material:** \_\_\_\_\_

**II. Choose type of documentation.**

**Matching**

1. What is the matching value that will be contributed as a result of this activity?
2. How will the matching value be calculated and documented?

**Reimbursement: Date entered in database: \_\_\_\_\_ Amount requested \_\_\_\_\_**

**III. Date(s) of Event/Purchase:** \_\_\_\_\_

**IV. School served:**

**Grades served:**  6<sup>th</sup>  7<sup>th</sup>

**V. Relation to the GEAR UP SWV goals. Check all that apply:**

- 1. Increase the academic performance and preparation for postsecondary education of GEAR UP students.
- 2. Increase the rate of high school graduation and enrollment in postsecondary education of GEAR UP students.
- 3. Increase GEAR UP SWV students' and their families' knowledge of postsecondary education options, preparation, and financing.
- 4. Increase the number of students who build and exhibit social, emotional, and academic resilience.

**VI. If this is a Match submission, how does this event/activity/material**

- Relate to GEAR UP SWV objectives?
- Expand current efforts and provide services and activities that would not have otherwise been provided without the new federal GEAR UP SWV funding?

**VII. Indicate and attach necessary documents to validate this event/activity/material:**

	Attached	Not required
Agenda/Schedule		
Rosters/Sign-In Sheets		
Names of staff participating		
List of materials with costs		
Registration materials/cost		
Purchase Order		
Invoice*		
Copy of check/payment voucher*		

**\*Invoice and copy of check or payment voucher/receipt must accompany matching documentation and reimbursement requests. Please scan necessary documentation and upload to the PI database. Electronic signatures are acceptable.**

**Line items reimbursed through other federal funds or through GEAR UP federal funds cannot be counted as Match.**

\_\_\_\_\_  
Signature of GEAR UP SWV Local Coordinator

OR

\_\_\_\_\_  
Signature of Chief Financial Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date