

DARTMOUTH

Office of Human Resources

7 Lebanon St., suite 203

Hanover, NH 03755

603-646-3411

human.resources@dartmouth.edu

REQUEST FOR ADOPTION EXPENSE REIMBURSEMENT

Employee Name: _____ Dart ID: _____

E-mail: _____ Daytime Phone: _____

Address: _____

✓ Each line item must include a copy of the invoice and proof of payment ✓

	Date of Service	Description of Service	Amount of Service	Invoice Attached	Proof of Payment
A					
B					
C					
D					
E					
F					
G					
			Total Requested:	\$	
			Total Approved:	\$	

Employee Signature: _____ Date: _____

Attach copies of all receipts and proof of payment to this completed form and send to: Mail: Human Resources Benefits Office -7 Lebanon Street, Suite 203 -Hanover, NH 03755, Hinman: HB 6042, or Email: to Human.Resources.Benefits@dartmouth.edu

Human Resources Benefits Department Use Only:

Authorized Approval _____ Date: _____	<input type="checkbox"/> HRMS
Additional Comments/Explanation: _____	<input type="checkbox"/> E-Mail
	<input type="checkbox"/> Other

Information about the Adoption Reimbursement Benefit:

Description of Benefit:

The College provides a reimbursement up to \$5,000 per calendar year for qualified expenses associated with the cost of adopting a child. A list of qualified adoption expenses is listed below:

- For more information on the benefit, please visit our website at <http://dartgo.org/adoption>

Qualified Adoption Expenses:

Qualified adoption expenses are reasonable and necessary expenses directly related to, and for the principal purpose of, the legal adoption of an eligible child.

Qualified adoption expenses include:	Qualified adoption expenses DON'T include:
<ul style="list-style-type: none">• Adoption Fees• Attorney Fees• Court Costs• Travel Expenses (including meals and lodging while away from home)• Re-adoption expenses relating to the adoption of a foreign child.	<ul style="list-style-type: none">• For which you received funds under any state, local or federal program.• That violate state or federal law.• For carrying out a surrogate parenting arrangement.• For the adoption of your spouse's child.

Eligible Child:

- Any child under age 18. If the child turned 18 during the year, the child is an eligible child for the part of the year he or she was under age 18.
- Any disabled individual physically or mentally unable to take care of himself or herself.

Instructions:

- Submit a completed Request for Adoption Expense Reimbursement form and appropriate supplementary documentation (e.g. must include both invoices and corresponding proof of payment).
- All Adoption Requests (with supporting documentation) must be received no later than November 1st to guarantee reimbursement within the current calendar year allotment. Requests received after November 1st will be applied toward the following calendar year allotment.
- Send documents to the Benefits Office at:
 - Email: Human.Resources.Benefits@Dartmouth.edu
 - Mail: Human Resources-Benefits Office (HB 6042) 7 Lebanon Street, Suite 203 Hanover, NH 03755
- Keep copies of all documents for your files.
- Materials will be reviewed by the Benefits Office, who will then send a confirmation email to the employee about expected reimbursement, amount and timeline.