



Special Olympics  
**Unified Champion  
Schools**

# **Unified Champion Schools Reimbursement Process**

# Grant Overview



- The UCS grant allows for the reimbursement of eligible expenses
- Your school or district will make purchases, pay invoices, and pay stipends to advisors and coaches.
- After payment is made, you may submit a reimbursement request to SONJ within 30 days
- Only schools in good standing are eligible for reimbursement
- Grant funds may not be shared between schools
- Funds not used by June 30 are forfeited

# General Reimbursement Info

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Olympics**  
New Jersey



- Download the reimbursement request forms from our website
  - Expense Reimbursement Form – for all expenses other than stipends. This includes transportation, supplies, uniforms, etc.
  - Stipend Reimbursement Form – for all stipends.
- Please:
  - Complete the form electronically
  - Save the form and your documentation as a PDF named Invoice\_YourSchoolName\_Date.pdf
  - Send to [UCS@SONJ.org](mailto:UCS@SONJ.org) with Your School Name – Reimbursement Request in the subject line
- Send a separate request for each school, even if we're reimbursing the district
  - Awards are intended for use only by the school named in the award letter
  - If you're splitting a cost between two or more schools, explain that in your email

# Expense Reimbursement



 **Expense Reimbursement**

School Name & District: \_\_\_\_\_

Check Made Out To: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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Vendor	Date of Purchase	Cost

**Total Amount:** \_\_\_\_\_

Approximately how many students WITH intellectual disabilities used or will use these supplies? \_\_\_\_\_

Approximately how many students WITHOUT intellectual disabilities used or will use these supplies? \_\_\_\_\_

**Please share the purpose of this purchase.**


How will these items be used? By whom? When? How does this support Unified initiatives?

Please save this document as **Invoice\_YourSchoolName\_Date.pdf** and email to UCS@SONJ.org with receipt or original invoice and proof of payment. Please only send PDFs.

- School Name and District – full names of your school and district
- Check Made Out to – who is SONJ reimbursing?
- Mailing Address – where should SONJ send the check?
- Vendor – the entity paid by the school
- Date of Purchase – date you made the purchase
- Cost – total cost of the item(s)
- Total Amount – please add your total!
- # students with/without IDD – these should be nearly identical to adhere with Unified guidelines
- Purpose of purchase – tell us how the item(s) will be used. For example – “transportation to away soccer game on 10/2 at Main Street High School” or “batons and tape measure for use at Unified track practice and competitions”
- Use additional forms if needed

# Expense Reimbursement



 **Expense Reimbursement**

School Name & District: \_\_\_\_\_

Check Made Out To: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

---

Vendor	Date of Purchase	Cost

Total Amount: \_\_\_\_\_

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How will these items be used? By whom? When? How does this support Unified initiatives?

Please save this document as **Invoice\_YourSchoolName\_Date.pdf** and email to UCS@SONJ.org with receipt or original invoice and proof of payment. Please only send PDFs.

## Send with:


- Receipt or original invoice
  - Cannot accept quotes, estimates, PO, etc.
- Proof of payment
  - Copy of the check is the preferred documentation
  - If needed, we can accept a printout of credit card confirmation, account ledger, etc.
- Proof of receipt for Amazon orders
  - A screenshot of the “Delivered” page suffices

## Notes:

- Please don't send a PO. While they're important to your process, they don't provide any needed info to SONJ
- Wait to submit until you receive the items/service
- Use this form for everything except stipends
  - Facility rental, transportation, supplies, etc.
- We should see info in your monthly reports referencing what you purchased. For example, if you purchase track batons, your reports should reference track practices

# Stipend Reimbursement





## STIPEND COVER SHEET

If you are submitting more than one stipend reimbursement request, please include this cover sheet to total your total amounts. Please be sure to also submit an individual stipend reimbursement request form, proof of payment, a detailed list of the individual's role (including dates of events). If you would not like to request reimbursement for employer taxes up to 7.65%, please do not include those amounts.

School Name & District:

Check Made Out To:



Mailing Address:

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Individual Name	Type of Stipend (Coach, Advisor, Liaison)	Employer Taxes Not to exceed 7.65%	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Total Amount:


Please save this document as **Invoice\_YourSchoolName\_Date.pdf** and email to [UCS@SONJ.org](mailto:UCS@SONJ.org) with receipt or original invoice and proof of payment. Please only send PDFs.



- Use the stipend cover sheet if you're requesting reimbursement for more than 1 stipend
- We created this because we need the total reimbursement amount
- This cover sheet cannot be submitted alone

# Stipend Reimbursement



 **Stipend Reimbursement**

School Name & District: \_\_\_\_\_

Check Made Out To: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Amount of Employer's Taxes (not to exceed 7.65%): \_\_\_\_\_

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Stipend Paid To	Type of Stipend	Amount of Stipend

Total Amount: \_\_\_\_\_


*Please include taxes if you're requesting that amount be reimbursed*

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Please share a detailed description of this individual's role, including all meeting/ event dates. You're welcome to include a separate document if that's easier.

\_\_\_\_\_


Please save this document as **Invoice\_YourSchoolName\_Date.pdf** and email to [UCS@SONJ.org](mailto:UCS@SONJ.org) with proof of payment from the school district to the individual. Please only send PDFs.

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- School Name and District – please use full names of your school and district
- Check Made Out to – who is SONJ reimbursing?
- Mailing Address – where should SONJ send the check?
- Employer's Taxes - we can reimburse up to 7.65%; this amount must be included in your request and will be deducted your grant award
- Stipend paid to – who did the school pay?
- Type of stipend – select from the drop-down menu
- Bottom portions – fill these out completely and accurately! Without this info, the form will be returned to you.
  - You're welcome to include a separate document with this information
- One form per person/stipend

# Stipend Reimbursement



 **Stipend Reimbursement**

School Name & District: \_\_\_\_\_

Check Made Out To: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Amount of Employer's Taxes (not to exceed 7.65%): \_\_\_\_\_

---

Stipend Paid To	Type of Stipend	Amount of Stipend

Total Amount: \_\_\_\_\_


*Please include taxes if you're requesting that amount be reimbursed*

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Please share a detailed description of this individual's role, including all meeting/ event dates. You're welcome to include a separate document if that's easier.

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Please save this document as **Invoice\_YourSchoolName\_Date.pdf** and email to [UCS@SONJ.org](mailto:UCS@SONJ.org) with proof of payment from the school district to the individual. Please only send PDFs.

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## Send with:

- Proof of payment
  - Payroll report, copy of check, etc.
  - Can't accept timesheets as proof of payment
- Full list of meeting dates, practices, games, etc.
- For coach stipends, tell us what sport!

## Notes:

- Coaches must have current training certificate on file for us to reimburse their stipends
- Can only reimburse stipends for time outside of contracted hours
- Include employer's taxes in total if you want to be reimbursed for them

# How you can be helpful



- If you're regularly purchasing items, please consider waiting until you have a stack before sending
- Send as PDF to [UCS@SONJ.org](mailto:UCS@SONJ.org) with SCHOOL NAME – Reimbursement Request in the subject
  - Must be a PDF! No JPEG
- Your school/district really should not be invoicing SONJ
- Limit your submission to the requested documents
- If there's some special circumstance, please explain it in your email
- If you don't receive acknowledgement of your submission within 2 business days, please follow up.
- If you don't receive your reimbursement within 6 weeks, please follow up.

# Deadlines



- December 15, 2025 – T-Shirt Orders due
  - Note: this amount is deducted from your grant.
- January 20, 2026 – All expenses and stipends paid in 2025 due
- April 20, 2026 – Last day to purchase physical supplies
  - Expectation is that all physical supplies will be delivered by April 20 to allow ample time for use during the school year
  - Items delivered far after this date may not qualify for reimbursement
- **July 3, 2026 – Last day to request reimbursement for 2025-26**
  - Please plan your stipend payouts accordingly!
- July 31, 2026 – Our books close
  - Please let us know far before this date if there's an issue so we can address it before our books close

# EOY Submissions

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- Reimbursement requests submitted before April 20 will be processed if the school is in good standing at that time
- Requests submitted after April 20 will be processed as soon as all of the school's monthly reports, activity trackers, and the UMass survey are completed.

# Most importantly...

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- We're here to help! Please don't hesitate to reach out to us.
- There's no question too big or small