

Claim for a Payment for Work as an External Examiner, Reviewer or Advisor

BEFORE COMPLETION, PLEASE REFER TO THE NOTES FOR GUIDANCE ON THE REVERSE OF THIS FORM.

SECTION 1 (Details of Claimant - block capitals)

Surname						Title		
Fore	Forenames (in full)							
Home	Home Address							
Post	Post Code:							
Acad	Academic Year							
Title and Date of Examination Board, Research Degree Examination, Periodic Review or Programme Approval Event								
Natio	National Insurance Number							
Date	of Birth	<u>՝ </u>						
Daves	-v- D							
		ETAILS						
Sort Code								
Account Number								
Account Name								
Bank/Building Society Name Branch								
Passbook Number								

Section 2 (Fees)	
Basic fee: (for External Examiners, only paid on submission of annual report)	£
Moderation fee:	£
Attendance fee	
Please list dates attended	£
TOTAL AMOUNT CLAIMED):
Rail Fare (Standard Class) From:	£
to:	
Single or Return?	
Details of other expenses incurred. Includ accommodation, mileage and subsistence	
TOTAL EXPENSES	
Payment will not be made until evidence of UK has been verified by the department. By confirm this check has been taken.	f right to work in the y signing below, you
Claimant's Signature	Date

Are you Male or Female? Male ☐ M Female ☐ F						
Disability Status Not known to be disabled ☐ 1						
Declared disabled ☐ 2 Not know ☐ 3						
How would you describe your origin? This refers to people who share the same cultural background and identity, not country of birth or nationality.						
White British White Irish	□ 11 □ 12	Black or Black British – Caribbean Black or Black British –	□ 21			
Other White background Asian or Asian British –	□ 19	African Other Black background	□ 22 □ 29			
Indian Asian or Asian British – Bangladeshi	☐ 31 ☐ 33	Asian or Asian British – Pakistani	□ 32			
Chinese Mixed – White and Black	□ 34	Other Asian background Mixed – White and Black Caribbean	□ 39 □ 41			
African	□ 42	Mixed - White and Asian	□ 43			
Other Mixed background	□ 49	Other Ethnic background	□ 80			
Information Refused	□ 98		□ 90			
What is your country of Nationality?						
Please note these categories are those used in the National Census						

Office Use Only					
Fees (Section 2)					
Date Annual Report Received:					
Amount (£):					
Cost-Centre:		Internal Order:			
Expenses (Section 3)					
Amount (£):					
Cost-Centre:		Internal Order:			
Contact Details					
Contact Name:					
Contact No:					

Authorised Signature

Date

COMPLETION OF EXTERNAL EXAMINER/REVIEWER/ADVISER CLAIM FORM

NOTES FOR THE CLAIMANT

SECTION 1 — Details of Claimant

• All of the information must be completed overleaf. Any incorrect/incomplete information could result in a delay in processing your claim.

SECTION 2 — Fees & Expenses

- Please note that fees for External Examiners will only be paid upon receipt of the Annual Report (not applicable to Research Degree Examinations).
- Fee and Expense details are available on the External Examiner guidance web pages.
- All original receipts for any expenses claimed (including subsistence) must be securely attached to this form.

General Information

- Once the form has been completed, please forward the form to the appropriate team (Approvals and Review / Governance and Enhancement / Graduate School).
- Payments are not subject to National Insurance.
- Expenses are not subject to National Insurance or Income Tax.