

NB: All boxes indicated by \* on this page must be completed or payment will be delayed.

<b>F</b>	<b>UNIVERSITY OF BRISTOL EXTERNAL EXAMINERS FEE CLAIM FORM</b>	<b>F</b>
<b>E</b>	<b>* UoB DEPARTMENT:</b>	<b>E</b>
<b>E</b>	<b>PLEASE PRINT CLEARLY &lt;&lt;</b> <b>Return to School/Department</b>	<b>E</b>

**SECTION 1**      NB: SECTION 2 OVERLEAF MUST BE COMPLETED OR PAYMENT WILL BE DELAYED

<b>* CLAIMANT</b>	Title:		<b>GEN</b>	<b>National Insurance Number</b>								
All names:			<b>M</b>   <b>F</b>	<table style="width:100%; border-collapse: collapse;"> <tr><td style="width:12.5%; height: 20px;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td></tr> </table>								
Surname:				<b>Date of Birth</b> <table style="width:100%; border-collapse: collapse;"> <tr><td style="width:15%; height: 20px;"></td><td style="width:15%;"></td><td style="width:15%;"></td><td style="width:15%;"></td><td style="width:15%;"></td><td style="width:15%;"></td></tr> </table>								
* Home address (Essential for P60 despatch)				External examiners are not required to undergo right-to-work checks.								
.....												
.....												
.....												
Post Code:												

<b>Bank Account No</b>		<b>Sort Code</b>	
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<b>Summary of claim:</b> Dates From ..... to .....	<b>Dep't Ref No:</b>
<small>These dates are essential for correct calculation of NI liability</small>	

**Reason for payment of fee: >>**      Costs incurred for the

<b>DECLARATION</b>	<b>Summary</b>
I declare that the total claimed has been incurred by me solely in the course of the University's business and does not include costs incurred in travelling between my home and normal place of work. I confirm that I have not claimed any of these expenses before nor will claim them from any other source. I hereby claim reimbursement.	<b>£</b>
* Signed: .....	<b>Fee</b>
* Date: .....	Expenses
<b>CERTIFIED CORRECT</b>	Mileage .....@.....p
<b>AUTHORISATION</b>	.....@.....p
This claim is correct and in order for payment.	Other travel
* Print Name: ..... Unit Head	Accommodation
* Signed: ..... Unit Head	Subsistence
* Date: .....	Incidentals
* Note 1 Persons travelling by car claim 45 p per mile for the first 10,000 miles in any 1 year beginning 6th April & 25 p per mile thereafter. Claimants are asked to keep a record of their mileage on behalf of UoB during the current tax year starting the previous 6th April & record the cumulative totals above. (See Financial Regulations)	Other
* Note 2 The University will normally pay second class return fare.	<b>** TOTAL CLAIMED £</b>
* Note 3 Original receipts should be produced. Credit card vouchers or statements are not accepted as proof by Inland Revenue.	
* Note 4 Personal expenses (eg Alcoholic drinks) and third party expenses are not allow able	

<b>FOR ADMIN USE ONLY</b>	Ext Ref 1	
	Ext Ref 2: Order No:	
	Ext Ref 3: Other Dept Ref:	

Budget code	Account code	£	p	Description

Expenses Allow able	Rates / Calculations Correct	<b>* TOTAL</b>		For Finance Services use only Doc Type / Invoice No.
Must equal total claimed at **				
Initial when checked				F E E E X A M 4   FO WG 12 2 15

Any queries regarding this section - please contact: [personnel-office@bris.ac.uk](mailto:personnel-office@bris.ac.uk)

**\* Please indicate which of the following most closely describes the nature of the role undertaken (please X):**

This is a mandatory requirement for Government statistical purposes

1		Managers.
2A		Academic Professional.
2B		Non Academic Professionals.
3A		Laboratory, Engineering, Building, IT and Medical Technicians (including Nurses).
3B		Student Welfare Workers, Careers Advisors, Vocational Training Instructors, Personnel and Planning Officers.
3C		Artistic, Media, Public Relations, Marketing and Sports Occupations.
4A		Library Assistants, Clerks and General Administrative Assistants.
4B		Secretaries, Typists, Receptionists and Telephonists.
5		Chefs, Gardeners, Electrical and Construction Trades, Mechanical Fitters and Printers.
6		Caretakers, Residential Wardens, Sports and Leisure Attendants, Nursery Nurses and Care Occupations.
7		Retail and Customer Service Occupations.
8		Drivers, Maintenance Supervisors and Plant Operatives.
9		Cleaners, Catering Assistants, Security Officers, Porters and Maintenance Workers

The Equal Opportunities Commission and Commission for Racial Equality recommend that employers collect and monitor information to ensure that their recruitment practices are fair and open to all sections of the community. To help the University monitor the effectiveness of its Diversity policy in this area, please take a few moments to complete this section of the form.

**\* How would you describe your ethnic origin (please X)?**

11		White – British (11)			34		Chinese (34)
12		White – Irish (12)			39		Other Asian background (39)
19		Other White background (19)			41		Mixed – White and Black Caribbean (41)
21		Black or Black British – Caribbean (21)			42		Mixed – White and Black African (42)
22		Black or Black British – African (22)			43		Mixed – White and Asian (43)
29		Other Black background (29)			49		Other Mixed background (49)
31		Asian or Asian British – Indian (31)			80		Other Ethnic background (80)
32		Asian or Asian British – Pakistani (32)			98		Information refused (98)
33		Asian or Asian British – Bangladeshi (33)					

**\* And your nationality?**

**\* Do you consider yourself to be a disabled person?**

YES /  NO

### SECTION 3 : (Optional but helpful)

#### FEE DETAILS

#### EXPENSE DETAILS

Date	Details	No of Units	Fee per unit	Cost	Details	Postage / Telephone	Other agreed expenses
				£		£	£
* TOTAL HOURS MUST BE ENTERED IN BOX OVERLEAF				TOTAL	0.00	TOTAL	0.00

#### TRAVEL DETAILS

Date	Route or Destination	Purpose of Journey	No of Car Miles	Other travel	Costs of Other Travel	Details	Subsistence	Incidental Expenses
					£		£	£
TOTAL					0.00	TOTAL	0.00	0.00