

NHS Funded Students - Practice Placement Travel & Accommodation Claim Form

	<p>NHS Student Bursaries Hesketh House 200-220 Broadway Fleetwood FY7 8SS</p> <p>www.nhsstudentgrants.co.uk</p>
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Office Hours: Mon - Thurs 8.30am - 5.00pm and Fri 8.30am - 4.30pm

Please complete and return this form to your University, who will forward it to NHS Student Bursaries. We aim to process the form within 30 working days of receipt at the Unit.

1. Personal details - you must complete this section in FULL

SGU Reference number	<input type="text"/>
Surname	<input type="text"/>
Other names	<input type="text"/>
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/>
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>
Term-time address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>
Contact / Mobile number	<input type="text"/>
Correspondence address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>

2. College / Course Details - you must complete this section in full

Name of University / College	<input type="text"/>
Name of Course	<input type="text"/>
Type of Course	Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>

For Office use only:

3. Details of normal daily travel to study - you must complete this section in full

Full address of your University Base Site
This should be the address of the place you attend on a regular basis

	Postcode	

How do you travel to your University Base Site? (If you walk, please specify in the box)

If you use Public Transport, please indicate the cost of your DAILY **return** journey

If you **drive** or **cycle** to University, please indicate the DAILY **return** mileage

PLEASE NOTE:

Car Share / Lift to University - you must still show how far the DAILY **return** journey is from your term-time address to your place of study. We need to assume that you bear the entire cost of travelling to University each day. This is the figure that will be used to determine whether or not your Placement travel costs are in excess of your normal travel to University.

Failure to complete any of the above WILL result in your claim form being returned to you.

4. Details of travel to and from your Practice Placement - you must complete this section in FULL

FULL address of your Practice Placement Site

	Postcode	

Is this a community-based placement?

Yes

No

How do you travel to your Practice Placement site?

If you use Public Transport, please indicate the cost of your DAILY **return** journey

If you drive or cycle to your Practice Placement, please indicate the DAILY **return** mileage

PLEASE NOTE:

Lift to Practice Placement - if you receive a lift to your clinical placement (i.e. from a friend or family member) and you contribute towards their petrol costs, we may be able to reimburse you that cost. You will need to obtain a letter from the individual that drove you showing the dates you travelled with them, details of the journey and how much you contributed.

Failure to complete any of the above WILL result in your claim form being returned to you.

5. Details of Excess Accommodation Expenses - only to be completed if you wish to claim for excess accommodation

You can claim excess accommodation costs if you live away from your term-time address whilst on placement and are obliged to meet both the costs of your placement accommodation and of retaining your term-time accommodation.

You can only be reimbursed up to a maximum of 110% of the cost of maintaining your term-time address or the cost of maintaining your Practice Placement address, whichever is the lesser.

Are you living at a different address whilst out on Practice Placement? Yes No go to Section 6

Do you live with your parents during term-time? Yes No

PLEASE NOTE: If you normally reside with your parents during term-time the cost of your term-time address is nominally set at £20.00 per day (£30.00 per day if you study at a London based University), and payment, if appropriate, will be made at this rate. Your Bursary will have already been assessed at Parental Home rate.

We **DO NOT** require proof of maintaining your term-time address, if you reside with your parents.

Parental address

You MUST complete this section in full

	Postcode	

Address where you stayed whilst on Practice Placement

You MUST complete this section in full

	Postcode	

5. Details of Excess Accommodation Expenses (continued)

What was the period of your Practice Placement?

From to

What was the period of occupancy at your Practice Placement address?

From to

Are you claiming for the full period of your placement on this claim? Yes No

If 'NO' please give the dates you wish to claim for (i.e. 3 months placement 01/03/2004 - 31/05/2004, only claiming for 1 month on this claim eg. 01/03/2004 - 31/03/2004)

Dates claiming for:

From to

What is the cost of maintaining your term-time address whilst on Practice Placement?

YOU MUST SEND PROOF

What is the cost of maintaining your Practice Placement?

YOU MUST SEND PROOF

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6. Details of claim - you must complete this section in FULL (*Please photocopy this section if necessary*)

Provided that the cost of travelling to and from your placement is in excess of your normal daily travel costs between your term-time address and University you may claim the full amount.

Please show FULL details of each journey for which you are claiming and attach receipts as necessary.

Date	Journeys		Private Mileage			Public Transport		Other Allowable Costs	
	From	To	Miles	Community Mileage - Do not include in previous miles column	Passenger Miles	Means of transport (Bus; Train)	Cost of Transport	Tunnel Tolls	Car Parking
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									
18									
19									
20									
TOTALS									

7. Summary of Claim - you must complete this section in FULL

Please use this section to summarise the details of your claim using Sections 5 and 6.

Summary of Private Mileage

<u>Mode of Transport</u>	<u>No. of Miles</u>		<u>Mileage Rate</u>		<u>Total Amount</u>
Bicycle	Yourself <input type="text"/>	x	6.2 pence	=	<input type="text"/>
Vehicles up to 125cc (Mopeds and small Motorcycles)	Yourself <input type="text"/>	x	16.2 pence	=	<input type="text"/>
Vehicles over 125cc (Cars and large Motorcycles)	Yourself <input type="text"/>	x	23 pence	=	<input type="text"/>
	Passengers <input type="text"/>	x	2 pence	=	<input type="text"/>
Total cost of private mileage					£ <input type="text"/>
Total cost of public transport					£ <input type="text"/>
Other allowable cost (Car-parking, Tunnel Tolls etc.)					£ <input type="text"/>
Total transport costs					£ <input type="text"/>
Total of excess accommodation					£ <input type="text"/>

Full name of any passenger(s) claimed for:

Please include date of birth

Each passenger must be an NHS funded student

8. Student's Declaration - You must complete this section in FULL

I declare that I have read the Practice Placement Costs Guidance Notes and that the information I have given in this form is correct and that I have reasonably and necessarily incurred the costs mentioned ther for the purpose of attending my course. I undertake to repay, if required to do so, any amount I receive as a result of this claim, which exceeds the amount due to me.

Where expenses are claimed for the use of my own motor vehicle, my training institution has authorised such use and I confirm that my motor insurance policy covers all relevant claims and costs and that no liability is placed on the institution or on any NHS body.

Signature Date / /

Please remember it is imperative that you keep photocopies of all forms and receipts before passing these to your University for authentication. Failure to do so may result in the loss of vital receipts / invoices and the claim, if we encounter any unforeseen problems. Student Bursaries DO NOT keep photocopies of any travel claim forms or receipts.

9. Higher Education Institution Authorisation - University ONLY

Is this placement that the student is claiming for, an Elective or Non-Elective placement? Elective Non-Elective

An Elective Placement is where the student has chosen to attend and has chosen the location.

A Non-Elective Placement is classed as an integral part of the student's course and qualification would be conditional upon its completion.

Checklist

Has the student completed ALL the relevant sections? Yes No Return form to student
Are ALL accommodation receipts attached, where appropriate? Yes No
Have you authorised the means of transport used? (If the student has used taxis, please enclose a letter) Yes No

Declaration

I, being the authorised officer of the institution, which the student named in the form attends, certify that:

- the institution requires them to spend the periods specified here away from their normal place of study for the purpose of clinical training or overseas study;
- they have reasonably and necessarily incurred the expenses claimed here in accordance with the provisions of the NHS Bursary Scheme.

Signature Date / /
Printed Name
Position held

Institution's stamp