

Form PSM65: Declaration of Self Assessment Income

Helpline: 0845 358 6655 Hours Mon-Fri 8.00am - 6.00pm
and Sat 9.00am - 3.00pm

Complete this form and send to:

NHS Student Bursaries
Hesketh House
200-220 Broadway
Fleetwood
FY7 8SS

Please complete this form if you are self-employed, a Company Director or have income from land, property or furnished lettings. If the income is derived from the profits of a business, trade or profession, the figure to be declared is normally that for the accounting period ending **within the year 6 April 2008 to 5 April 2009**, adjusted as necessary for tax purposes (i.e. after deduction of any capital allowances) and finally agreed with HM Inspector of Taxes.

If you employ an accountant, please ask them to complete the appropriate sections in Part 3. If you do not employ an accountant, will you please complete the appropriate sections in Part 3 yourself with the figures as detailed on your tax return.

1. Student Details

Reference Number (see top of form PSM1)

Surname

Other names

2. Personal details - to be completed by the student's parent, spouse, civil partner or partner

Payroll Number

Title (please tick) Mr Mrs Miss Ms Other

Surname

Other names

Date of birth

3. Details of Income tax return - to be completed by the student's parent, spouse, civil partner or partner

Section 1. Self-employed

Date Business(es) started

Accounting Period from to

Net profit / loss

Less capital allowances

Total taxable profit

3. Details of Income tax return (continued) - to be completed by the student's parent, spouse, civil partner or partner

Section 2. Company Directors

Total Income

Taxable benefits and expenses (i.e. car, fuel BUPA etc.)

Total income (before deductions - including allowable expenses)

Section 3. Income from Land, Property and Furnished Lettings

Taxable profit from land

Taxable profit from rented property

Taxable profit from furnished lettings

Section 4. Deductions and Reliefs Allowable for Tax Purposes

Loan Interest (non MIRAS)

Retirement Annuity

Personal Pension

Loss Relief (if allowed by Inland Revenue)

Expenses (those not already deducted elsewhere)

Professional fees and subscriptions (not already deducted elsewhere)

Section 5 - Declaration: I / we certify that the details of income and liability for tax given above are a true record of the figures to be submitted to the Inland Revenue. I understand the Authority reserves the right to verify these with the Inland Revenue at any time. If the figures (above) are subsequently revised by the Inland revenue, I / we will advise the NHS Student Bursaries, and I understand that this will require the assessment to be re-viewed.

I understand that false declaration may result in an award being **withheld, re-assessed or permanently withdrawn.**

Signature of parent, spouse, civil partner or partner

Date

Signature of Accountant

Date

Accountant's stamp