

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 2009 to 5 April 2010**, 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

Surname

Other names

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

Title (please tick) Mr Mrs Miss Ms Other

Surname

Other names

Date of birth / /

Payroll Number

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

Section 1. Self-employed

partner or partner

Name of business / company

Business address

Registration number

Date Business(es) started

Accounting Period from to

Net profit / loss

Less capital allowances

Total taxable profit

Please provide your Statement of Account from HM Revenue and Customs

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

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)

4. Declaration

I declare that I am the person named in Part 2 of this form.

I confirm that I will inform NHS Student Bursaries immediately if there is any change to any of the details set out in this form, or if the figures on this form are subsequently revised by HM Revenue and Customs. I understand and accept that such changes will require the assessment to be reviewed.

I consent to the disclosure of information on this form to and by HM Revenue and Customs for the purposes of verification and in compliance with the Data Protection Act.

I understand that the administration of NHS student bursaries and responsibility for counter fraud and security management in the NHS are both responsibilities of the NHS Business Services Authority. I understand that NHS Student Bursaries may share the information on this form with the NHS Counter Fraud and Security Management Service for the purposes of the prevention, detection, investigation and prosecution of fraud or any other unlawful activity affecting the NHS.

I declare that the information on income and liability for tax given on this form and in any supporting documents is a complete and accurate record of the figures submitted to HM Revenue and Customs. I understand and accept that if I provide false or misleading information, financial support may be refused or withdrawn and I may be liable to prosecution and/or civil proceedings.

Signature of parent, spouse,
civil partner or partner

Date

Signature of Accountant

Date

Accountant's address

Accountant's telephone

Accountant's email

Accountant's stamp (if applicable)