provided by ...

Practice Placement Expenses (travel and accommodation) claim form 2015/16

Please read the guidance notes BEFORE you complete this form. Completed forms should be returned to your university who will certify them and send them to NHS Student Bursaries. You are advised to keep a copy of your form and any accompanying receipts/evidence before passing your claim to your university.

All PPE claims must be received by us from your university within six months of the date of the last day of the practice placement for which you are claiming.

You MUST remember to include a copy of your student coversheet with each form as your claim cannot be processed without this.

Universities should send completed forms to the address below. Please do not include any staples or sellotape and ensure the form has been signed and stamped to authorise it. NHS Student Bursaries, Ridgway House, Northgate Close, Middlebrook, Horwich, Bolton, BL6 6PQ

NHS Student Bursaries contact details: www.nhsbsa.nhs.uk/students Helpline: 0300 330 1345 (opening hours: Mon - Fri 8am - 6pm and Sat 9am - 3pm)

1. Personal Details - you must complete this section in full.

Student reference number	SBA
When did you first start your co	urse? Before 1 September 2012 On or after 1 September 2012
Surname	
Forename(s)	
Date of birth	DD/MM/YYYY
Term-time address	
	Postcode
Contact/mobile number	
Email address	

2. University course details - you must complete this section in full.

Name of university	
Name of course	

3. Details of normal daily travel to study - you must complete this section in full or your claim will be delayed.

Full address of your	
place of study. This	
should be the university	
address of the place you	
attend on a regular	Postcode
basis.	

How do you travel to your place of study? (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.

Other costs incurred for tunnels, toll roads, and car parking

If you are able to claim back any reimbursement for the cost of your travel to your normal place of study from your university, you **must** still provide details of the **full** cost of your actual travel (before reimbursement) in the relevant box/es above.

If you car share or receive a lift to university you must still show how far the **daily return** journey is from your term-time address to your place of study. This is the figure that will be used to determine whether or not your placement travel costs are in excess of your normal travel costs to university.

4. Details of travel to and from your practice placement - you must complete this section in full or your claim will be delayed.

FULL address of your		
practice placement site		
(If more than one,		
please detail on a		
separate sheet)	Postcoc	e
How did you travel to your prac	tice placement site?	
If you used public transport, ple	ase indicate the cost of your daily return journey.	
	and the second	
If you drove or cycled to placem	ent, please indicate the daily return mileage.	
Car hire		
If you used a hire car please ind	icate the costs here:	
Cost to you for hiring the car		
cost to you for himing the car		

Remember to include the appropriate receipts to enable your university to check your claim.

If you have incurred other costs such as tunnels, toll roads and/or parking charges **please go to Section 5** to enter these in the appropriate column. **Please do not enter mileage details**.

If you have not incurred any other costs associated with car hire, please go to Section 6.

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Cost for petrol for this claim

5. Details of claim - you must complete this section in FULL (please print as many pages as required)

Please show FULL details of each journey for which you are claiming and supply receipts as necessary. If you are claiming for more than 20 journeys for this placement period please print off and complete additional copies of this page of the claim form, as required.

	Date	Jour	neys	Please do any mileag	Please do not enter Public transport not r		Public transport		vable costs ly incurred tending ersity
	Γ	Postcode from	Postcode to	Return daily mileage to placement site	Community mileage	Means of transport (bus, train)	Cost of transport	Tunnels, toll roads, car parking or hire car and petrol costs if a hire car was used	Passenger miles
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									
18									
19									
20									
	TOTALS								

6. Details of accommodation expenses

6a. All students must complete this section in full.

Were you living at a different address	Yes	No	go to Section 7	
Do you live with your parents during	term-time?	Yes	No	
Address where you stayed whilst on practice placement				
You MUST complete this section in full		Postcode		
Period claiming for:				
From	to			
What was the cost of maintaining you	ur temporary accomodation whilst		c	

on practice placement? YOU MUST SEND PROOF

£

6b. Only to be completed by students who started their course before 1 September 2012.

What was the cost of maintaining your normal accomodation whilst on practice placement? **YOU MUST SEND PROOF unless you live with your parent(s)**

C	
1.	

7. Summary of claim - you must complete either Section 7a or 7b in FULL

7a. ONLY to be completed by students who started their course before 1 September 2012.

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

Summary of private mileage

Mode of transport		Total number of miles, including ommunity milea	l	Mileage rate		Total amount
Bicycle	Yourself		Х	20 pence	=	
Motor vehicle	Yourself		х	28 pence	=	

Full name of any passenger(s) claimed for: Each passenger must be an NHS funded student.

If there is more than one passenger please provide details of the dates and miles they travelled with you on a separate sheet.

Full name of passenger	Passenger's SBA number	Date of birth	No. of miles	Mileage rate	Total amount
				x 5 pence	
				x 5 pence	
				x 5 pence	
				x 5 pence	

Total daily mileage costs	f

£

f

Total public transport costs f

Total allowable costs, if any (e.g. car parking, car hire, tunnel charges, road tolls etc)

Total transport costs

7b. ONLY to be completed by students who started their course on or after 1 September 2012.

You may claim the difference between the cost of your daily travel to placement and the cost of your daily travel to your normal place of study.

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

Summary of private mileage

Mode of transport	Total number of miles, including community mileage		Mileage rate		Total amount
Bicycle	Yourself	х	20 pence	=	
Motor vehicle	Yourself	x	28 pence	=	

Full name of any passenger(s) claimed for: Each passenger must be an NHS funded student.

If there is more than one passenger please provide details of the dates and miles they travelled with you on a separate sheet.

Full name of passenger	Passenger's SBA number	Date of birth	No. of miles	Mileage rate	Total amount
				x 5 pence	
				x 5 pence	
				x 5 pence	
				x 5 pence	

Total daily mileage costs	£	
	+	
Total public transport costs	f	
	+	
Total allowable costs, if any (e.g. car parking, car hire, tunnel charges, road tolls etc)		
Total cost of your normal daily return travel to your university when not on practice placement This will be the total return cost of your daily travel to study (section 3) multiplied by the total number of days on placement being claimed (section 5). Please refer to the mileage rates above to calculate the cost.	- 	
To work out the total amount of travel costs you can claim, deduct your total daily travel to university from the total cost of all your placement travel.	f	
Total accommodation costs	f	

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

I confirm that I have read and understood the guidance notes and my claim for reimbursement of expenses for travel and accommodation reasonably incurred as a direct result of attending my practice placement.

I confirm that where I make a claim for expenses as a result of using my own motor vehicle, this use has been authorised by my university, and that my motor insurance policy covers all relevant claims and costs and that no liability is placed on the university or on any NHS body.

I declare that the information given on this form and in any supporting documents provided is complete and accurate. I understand and accept that if I provide false or misleading information, I may be liable to prosecution and/or civil proceedings and debt collection.

I understand that all PPE claims must be received by NHS Student Bursaries from my university within six months of the date of the last day of the practice placement I am claiming for otherwise the costs will not be reimbursed.

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 NHS Protect for the purposes of the prevention, detection, investigation and prosecution of fraud or any other unlawful activity affecting the NHS.

Signature	Date	

In the event of any queries arising at a later date with regard to your claim, you are advised to take copies of all forms and receipts before passing these to your university for authentication.

Please see next page for university authorisation

9. University authorisation - Your university must complete this section in full

Checklist

Has the student completed ALL the relevant sections and signed and dated the declaration?	Yes	No	Return form to student
Are ALL accommodation receipts attached, where appropriate?	Yes	No	Return form to student
Have you authorised the means of transport used? (If the student has used taxis, please enclose a letter)	Yes	No	Return form to student
Has the student provided you with a student coversheet?	Yes	No	Return form to student
Has the student submitted this form to you within 6 months of the final date of the placement period for which they are claiming?	Yes	No	Return form to student - no expenses can be paid

Declaration

I declare that I am an authorised officer of the university named in Part 2 of this form.

I confirm that the person named at Part 1 of this form is a student at the university named in Part 2 of this form and that:

- as part of their course the institution requires them to spend the period(s) of time specified in this form away from their normal place of study for the purpose of clinical training or overseas study;
- the claim for expenses detailed in this form has been reasonably and necessarily incurred in accordance with the provisions of the NHS Bursary Scheme.

Where the student named at Part 1 of this form has made a claim for use of their own motor vehicle, I confirm that this has been authorised by the university.

I understand and accept that if I provide false or misleading information, I may be liable to prosecution and/or civil proceedings.

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 NHS Protect for the purposes of the prevention, detection, investigation and prosecution of fraud or any other unlawful activity affecting the NHS.

Signature		Date	
		University s	stamp
Print name			
Position held			