

NHS Student Bursaries - Practice Placement Expenses (travel and accommodation) claim form 2017/18

Who is this form for?

If you are either

- a **continuing** NHS Bursary funded student (including a continuing medical or dental student), or
- a medical or dental student who is eligible for NHS Bursary funding for the first time in 2017/18

or

you have commenced either

- an nhs-commissioned dental hygiene or dental therapy course from 1 Aug 2017; or
- an [eligible part-time programme](#) or;
- a postgraduate healthcare course on or after the above date;

you should use this form to claim practice placement expenses.

Please note if you are a **new** healthcare student starting a course from 1 August 2017 and you are funded via the Student Loans Company, but wish to claim Travel and Dual Accommodation Expenses from the [NHSBSA's Learning Support Fund website](#), you should complete the separate claim form for this purpose. You should also refer to our separate guidance booklet 'Learning Support Fund'. If you are unsure whether the course you are on enables you to claim PPE, please refer to our [Healthcare Student Funding Flowchart](#).

Please refer to our guidance booklet [A step by step guide to completing your PPE claim form](#) as you fill in this claim. Completed forms should be returned to your university who will certify them and send them to us. 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 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 **NHS Student Bursaries, Ridgway House, Northgate Close, Middlebrook, Horwich, Bolton, BL6 6PQ**. Please do not include any staples or sellotape and ensure the form has been signed and stamped to authorise it.

Our contact details:

nhsbsa.nhs.uk/student-services

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 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	You can obtain this number by logging on to your BOSS account
Surname	<input type="text"/>	
Forename(s)	<input type="text"/>	
Date of birth	<input type="text"/>	
Term-time address	<input type="text"/>	
	<input type="text"/> Postcode	
Contact/mobile number	<input type="text"/>	
Email address	<input type="text"/>	

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

Name of university	<input type="text"/>
Name of course	<input type="text"/>

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

Full address of your normal place of study. This should be the place you attend on a regular basis when not on placement.	<input type="text"/>
	<input type="text"/> Postcode

Please advise how you travel to your normal place of study (include walking or if you receive a lift).

If you use public transport, please show the cost of your **daily return** journey.

If you drive or cycle to university, please show the **daily return** mileage.

Other costs for tunnels, toll roads, and car parking if incurred whilst travelling to your normal place of study

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)

Postcode

How did you travel to your practice placement site?

If you used public transport, please show the cost of your **daily return** journey.

If you drove or cycled to placement, please show the **daily return** mileage.

Please note: reimbursement will not be made for any journeys where you received a lift to your placement.

Car hire

If you used a hire car to travel to and from your placement please show the costs here:

Cost to you of hiring the car (please provide evidence of this with your claim form).

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 **go to Section 5** and enter your costs in the appropriate column.

5. Details of claim - you must complete this section in FULL

Please provide 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 you should print off and complete additional copies of this page of the claim form, as required.

Date		Journeys		Total daily mileage including mileage undertaken if you used a hire car		Public transport		Other allowable costs not normally incurred when attending university	
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. About your placement accommodation.

Were you living at a different address whilst on practice placement?

Yes

No

go to Section 7

Do you live with your parents during term-time?

Yes

No

Full address where you stayed whilst on practice placement

You MUST complete this section in full

Postcode

Is the above your parent/s address?

Yes

No

If you have answered yes to this question, you will not be able to claim any temporary accommodation costs. **Do not complete the rest of this section.** Proceed to Section 7 of the form instead.

Period you are claiming for:

From

to

What was the cost of maintaining your temporary accommodation whilst on practice placement? **YOU MUST SEND PROOF**

For students who started their course on or after 1 September 2012, accommodation costs are reimbursed at a set maximum nightly rate:

Non-commercial accommodation: up to £25 per night

Commercial accommodation: up to £55 per night

6b. Your placement accommodation cost.

This section is only to be completed if you started your course on any date before 1 September 2012. If you started your course on or after this date, please go straight to Section 7a of the claim form.

What was the cost of maintaining your normal accommodation whilst on practice placement? **YOU MUST SEND PROOF unless you live with your parent(s) during term time or you stayed at their home for the purpose of attending your placement.**

7. Summary of claim

7a. Transport and passenger details.

All students must complete this section in full.

Use this section to summarise the details of your travel costs using the information you have entered at Sections 5 and 6 of this form.

Summary of private mileage

Mode of transport		Total number of miles, including community mileage		Mileage rate		Total amount
Bicycle	Yourself	<input type="text"/>	x	<input type="text" value="20 pence"/>	=	<input type="text"/>
Motor vehicle	Yourself	<input type="text"/>	x	<input type="text" value="28 pence"/>	=	<input type="text"/>

Passengers

If you took another NHS student/s to/from placement, enter the details of your passenger/s below. Each passenger must be an NHS funded student. If you are entering information here, ensure it matches the information you have entered in the 'Passenger miles' column in Section 5.

If you are not claiming for any passenger costs, leave the table blank and go to Section 7b or 7c.

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

Passenger mileage - dates of travel

Please state on which dates you took the above named passengers to placement. If you took them every day of the placement, enter 'all' in the 'Date/s passenger/s taken to placement' column.

Passenger	Date/s passenger/s taken to placement
First passenger (as above)	
Second passenger (as above, if applicable)	
Third passenger (as above, if applicable)	
Fourth passenger (as above, if applicable)	

7b. Summary of costs.

This section should **only** to be completed by students who started their course **before 1 September 2012**.

Total daily mileage costs	£ <input type="text"/>
Total public transport costs	£ <input type="text"/>
Total allowable costs, if any (e.g. car parking, car hire, tunnel charges, road tolls etc)	£ <input type="text"/>
Total costs	£ <input type="text"/>

If you started your course on or after the above date, please go to Section 7c.

7c. Summary of costs

This section should only 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.

Total daily mileage costs

+

Total public transport costs

+

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

=

Total cost of all your placement travel this claim

minus

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.

Total accommodation costs

Enter the amount for your total accommodation costs if you provided any in Section 6a or 6b.

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 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	<input type="checkbox"/>	No	<input type="checkbox"/>	Return form to student
Are ALL accommodation receipts attached, where appropriate?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Return form to student
Have you authorised the means of transport used? (If the student has used taxis, please enclose a letter)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Return form to student
Has the student provided you with a student coversheet?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	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	<input type="checkbox"/>	No	<input type="checkbox"/>	Return form to student - no expenses can be paid

Declaration

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

I confirm that the person named at Section 1 of this form is a student at the university named in Section 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 Section 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 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

Print name

Position held

University official stamp