

NHS Student Bursaries - Confirmation of Pay Form (PSM60)

www.nhsbsa.nhs.uk/students

Please complete Sections 1 and 2 of this form if you do not have a form P60, or week 52 payslip. Ask your employer to complete Section 3 to confirm your income for the most recent complete financial year (**6 April to 5 April**).

1. Student Details

Reference Number	SBA <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Surname	<input type="text"/>
Other names	<input type="text"/>

2. Details of Parent, Spouse, Civil Partner or Partner

Title (please tick)	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/>
Surname	<input type="text"/>
Other names	<input type="text"/>
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>
Payroll Number	<input type="text"/>

3. Details of Earnings - to be completed by the employer

Employer's Name	<input type="text"/>
Employer's Address	<input type="text"/>
	<input type="text"/> Postcode
Employer's Telephone No.	<input type="text"/>
Employer's Email Address	<input type="text"/>

3. Details of Earnings (continued)

The amounts detailed below are from the financial year ending 5 April (Enter year)

	£	p
Gross pay - Include employee pension contributions, statutory sick pay and overtime	<input type="text"/>	<input type="text"/>
Other taxable income or bonus	<input type="text"/>	<input type="text"/>
Pay for previous employment	<input type="text"/>	<input type="text"/>
Taxable benefits - car, fuel BUPA etc.	<input type="text"/>	<input type="text"/>
Employee pension contributions paid	<input type="text"/>	<input type="text"/>
National Insurance contributions	<input type="text"/>	<input type="text"/>
Income Tax	<input type="text"/>	<input type="text"/>
Tax Code	<input type="text"/>	

4. Declaration

I declare that the information given on this form is complete and accurate.

I declare that I am authorised to provide the above details of earnings of the person named at section 2 of this form for the financial year ending 5 April (Enter year) on behalf of the employer named at section 3 of this form.

Signature (for employer)	<input type="text"/>	Company Stamp (if applicable)
Name	<input type="text"/>	
Position	<input type="text"/>	
Date	<input type="text"/>	

Data protection privacy notice

The NHS Business Services Authority (NHSBSA) is responsible for this service.

Why we process your information

We will use the information you provide to:

- process your application for payment,
- detect and prevent fraud and mistakes and
- analyse general trends and correlations to support more effective planning of NHS services.

By law we must process this information on behalf of the NHS.

Your information will not be transferred outside the [European Economic Area](#).

Sharing your personal information

To prevent, detect and investigate fraud and errors, we may share your information to check the records of:

- Higher Education Institutions
- HM Revenue and Customs
- The Home Office
- Student Loans Company
- Bodies performing functions on behalf of the above organisations

Information may be shared with the Department of Health and Social Care for the purposes of investigating and prosecution of fraud, or any other unlawful activity affecting the NHS.

Information may be shared with the Cabinet Office in relation to the National Fraud Initiative, which matches electronic data within and between public and private sector bodies to prevent and detect fraud.

Anonymised information relating to your equality and diversity may also be shared with the Department of Health and Social Care to monitor the compliance with Equality law.

Keeping your personal information

Your personal data will be deleted from our systems and files no later than seven years after your final payment has been completed.

Your rights

The information you provided will be managed as required by Data Protection law including the General Data Protection Regulations (GDPR).

You have the right to:

- receive a copy of the information the NHSBSA hold about you
- request your information be changed if you believe it was not correct at the time you provided it

From the 25 May 2018 you have the right to:

- request that your information be deleted if you believe the NHSBSA are keeping it for longer than necessary

Find out more about [your rights and how we process information](#).