## YORKSHIRE AND THE HUMBER POSTGRADUATE DEANERY - FORM SL-C

## CLAIM FORM FOR STUDY/EXAMINATION LEAVE FOR ALL TRAINEES WITHIN NORTH & EAST YORKSHIRE AND NORTHERN LINCOLNSHIRE AND WEST YORKSHIRE LOCALITIES

THIS APPLICATION FORM SHOULD BE COMPLETED IN LINE WITH "STUDY LEAVE GUIDANCE FOR TRAINEES IN: NORTH & EAST YORKSHIRE AND NORTHERN LINCOLNSHIRE LOCALITY AND WEST YORKSHIRE LOCALITY"

Claims may be made as foll	ows:
Travel Expenses:	Road – Public Transport Rate
·	Rail – standard class travel
Accommodation/Subsistence:	<b>Lunch Allowance</b> (5 to 10 hours, absent between noon and 2pm): £5.00
	Evening Meal Allowance (over 10 hours, returning after 7pm): £15.00
	Lunch and Evening Meal Allowances (over 10 hours, time
	away spans noon and 7pm): £5.00 + £15.00
	Night Subsistence (overnight): maximum £55.00
	For overnight accommodation within London, the
	overnight rate should not exceed £150 per night.
	For overnight accommodation outside of London,
	the overnight rate should not exceed £120 per night.
	Non-commercial accommodation (subsistence at the flat
	rate of £25 per night if staying overnight with friends - not
	charging for accommodation, meals)
	With the exception of Non-commercial accommodation,
	receipts are required.
Expenses not refundable:	Include: Examination fees, course dinners, telephone calls,

хp

ers, telephone calls, s, bar bills, newspapers.

Claims must be submitted within 3 months of incurred expenses with all receipts and proof of attendance					
Name: (Block Letters)					
Specialty & Grade					
Email Address:					
Correspondence Address:					
Employing Trust: (for payroll payment)please include payroll number	Payroll :				
GMC Number:					
Course Attended:		Date(s) of course:			
Expenses		£	Approved by Employing MEC (Y/N)		
Travel:					
Subsistence:					
Accommodation:					

Course Fee:		
Total:		

I CERTIFY THAT:-

- 1 The travelling and incidental expenses claimed hereon were actually and necessarily incurred whilst engaged on the business stated.
- 2 My insurance policy covers full third party insurance for the use of the vehicle on official business including cover against risk of injury to or death of passengers and damage to property whilst on official business.
- 3 On each occasion for which subsistence is claimed I necessarily spent more on meals than if I had been at my permanent station.

Claimant's Signature: ..... Date .....

## To be completed by Medical Education Centre at Employing Trust:

Authorised by (print name): .....Sign