

External Examiner (UNDERGRADUATE only)

Claim for fees and expenses

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| Important: This form should be used by External Examiners reviewing work for Undergraduate Programmes or both Undergraduate and Postgraduate Taught programmes. There is a separate form for Postgraduate Taught programmes only.  Claim forms should be completed in BLOCK CAPITALS and returned to the relevant Faculty Curriculum and Quality Assurance (CQA) Team as soon as possible after the Board of Examiners’ meeting, and no later than three months after the date of the meeting. Please read the guidance overleaf before making a claim.  Fees and expenses for Postgraduate Taught and Postgraduate Research Programmes must be claimed on the PGR & PGT form.  All Fees and Expenses for Undergraduate Programmes will be processed through the payroll. Tax and NIC will be deducted if applicable.  TIER 2 VISA HOLDERS MUST COMPLETE SECTION 2 OF THIS CLAIM FORM TO EVIDENCE VISA COMPLIANCE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **External examiner details: \* mandatory requirement** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title**:** (please tick one) | | | | | | Mr. | | | | | | | | Mrs. | | | | | | Ms. | | | | | Miss. | | | | | | | | Prof. | | | | | | | | Dr. | | | |
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| \*Surname: |  | | | | | | | | | | | | | | | | \*Forename(s): | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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| \*Pay Reference Number /  Staff Number: | | | | | | |  | | | |  | | | | |  | | |  | | |  | | | |  | |  | | | |  | | | | | | | | | | | | |
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| **\***Date of Birth: | | |  | | | | | | (dd/mm/yyyy) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **\***National Insurance Number: | | | | | | | |  | | | |  | | |  | | |  | | |  | | |  | |  |  | | |  | | | |  | | | | | | | | | | |
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| \*Signature of claimant: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | \*Date: | | |  | | | | | |
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| **Faculty Curriculum and Quality Assurance (CQA) Team contact details**   |  |  |  |  | | --- | --- | --- | --- | | Name: |  | Faculty & School: |  |   Generic contact email for queries   |  | | --- | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Payment details**  **Please complete this section if it is your first claim or if there are any changes to your personal details.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Home address: | | | | | | | | | |  | | | Bank Name: | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | | Branch: | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | | Sort code: | | | | | | | | | | | | |  | | |  | | **X** | | | |  | |  | | | **X** | |  |  | |
|  | | | | | | | | | |  | | | Account number | | | | | | | | | | | | |  | | |  | |  | | | |  | |  | | |  | |  |  | |
|  | | | | | | | | | |  | | | For Non-UK Accounts: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | |  | | | Currency: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Postcode: | |  | | | | | | | |  | | | IBAN Number: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | | SWIFT Number: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
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| Email address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Work undertaken/date of Board of Examiners’ meeting:  **£ p** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee *(as per your Letter of Appointment)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  |
| Travel (*see guidance notes overleaf*): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  |
| Subsistence (*see guidance notes overleaf*): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  |
| Incidental expenses (*see guidance notes overleaf*): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | **Total amount claimed** | | | | | | | | | | | |  | | | | | |  |

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| **Authorisation**  **Authorised Faculty Signature:** |  |  | | | | | | | | | | |
|  | **Subproject Code:** | | | | | | | | | **£** | **p** |
| **Print Name:** |  |  |  |  |  |  |  |  |  |  |  |
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| **Date:** |  |  |  |  |  |  |  |  |  |  |  |
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| **Budget Holder Signature:** |  |  |  |  |  |  |  |  |  |  |  |
|  | **Total** | | | | | | | | |  |  |
| **Print Name:** |  |  | | | | | | | | |  |  |
|  |  |  | | | | | | | | |  |  |
| **Date:** |
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**Section 2: Tier 2 visa holder declaration of hours**

**If you are a Tier 2 visa holder you must declare any other work you have done during the week(s) of your claim. If this work is in addition to your main post you cannot work more than 20 hours in a week in an additional post.**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Week commencing** |  | **Mon** | **Tues** | **Wed** | **Thurs** | **Fri** | **Sat** | **Sun** | **Total** |
| **Week 1 Date of Work** | Hours worked in main post |  |  |  |  |  |  |  |  |
| Hours worked as External Examiner |  |  |  |  |  |  |  |  |
| Hours worked in any other employment |  |  |  |  |  |  |  |  |
| **Week 2 Date of Work** | Hours worked in main post |  |  |  |  |  |  |  |  |
| Hours worked as External Examiner |  |  |  |  |  |  |  |  |
| Hours worked in any other employment |  |  |  |  |  |  |  |  |
| **Week 3 Date of Work** | Hours worked in main post |  |  |  |  |  |  |  |  |
| Hours worked as External Examiner |  |  |  |  |  |  |  |  |
| Hours worked in any other employment |  |  |  |  |  |  |  |  |
| **Week 4 Date of Work** | Hours worked in main post |  |  |  |  |  |  |  |  |
| Hours worked as External Examiner |  |  |  |  |  |  |  |  |
| Hours worked in any other employment |  |  |  |  |  |  |  |  |

**Definitions:**

**Hours worked in main post** – These are the hours that you have worked in the post attached to your Tier 2 visa.

**Hours worked as External Examiner** – These are the hours worked within the External Examiner role.

**Hours worked in any other employment** – These are the hours that you have worked in an additional post in line with your visa requirements. You must declare these to ensure that all hours you have worked are in line with UK VI visa regulations.

**General Information**

By completing this form we are able to evidence your Tier 2 visa compliance.

If hours, outside of the ‘main post’, exceed 20 hours per week this claim cannot be processed. Please refer to the Quality, Standards and Accreditation Team ([qsa@soton.ac.uk](mailto:qsa@soton.ac.uk)) in this situation.

Annual leave is included within the sum paid.

**Guidance for completing claim for fees and expenses:**

This form should be used by External Examiners for Undergraduate Programmes only to request reimbursement of annual fee and/or out of pocket expenses which were agreed by the Faculty/budget holder prior to the expenditure being incurred.

Payments will only be made where all of the authorisations and declarations have been completed. All original receipts must be retained by the claimant or Faculty approver.

**This form has been set up to enable you to type your information directly into the fields. If you choose to handwrite the form then please print all information in CAPITALS as claims will not be paid where the claim is not legible.**

All parts of the form are mandatory.

**Fees**

Your fee will be included in your Letter of Appointment sent at the start of your appointment.

External examiners may claim reasonable expenses if they are wholly, necessarily and exclusively incurred in the course of the University’s business and are in accordance with the University’s [External Examiner Travel and Expenses Guidance](https://cdn.southampton.ac.uk/assets/imported/transforms/content-block/UsefulDownloads_Download/36659E4F950F400491F55B8D0CF4D537/External%20Examiner%20Travel%20and%20Expenses%20guidance.pdf#_ga=2.34643873.1293252093.1568012334-548755292.1558527812).

**Mileage & mileage costs**

Your claim must give the overall number of miles, the starting point and the destination including postcodes. If the number of miles you are claiming does not match the number of miles calculated by the AA route planner, your claim must give a reason for the higher mileage, or your claim will be reduced to match the AA route planner mileage.

Details of current mileage rates are available at <https://www.southampton.ac.uk/finance/services/reclaiming-expenses-non-university-personnel.page>.  Alternatively, your SAAA Admin contact will be able to provide you with details

A vehicle used on University business is done so at your own risk. You must ensure that your personal insurance policy provides cover for the use of the vehicle in connection with your “trade or profession”. Where equipment is to be carried, this activity should also be covered under the terms of your policy.

**Other expenses**

For expenses that have been agreed by the University of Southampton you must give the detail of the expense incurred, record the costs and attach original, itemised receipts. All expenses will be reimbursed in GBP or Euros.

You must convert the value of your receipts into the currency that you are expecting payment in. So, if you are expecting your payment in GBP and have receipts in a foreign currency, you will need to convert these into GBP. Either convert your receipts using the actual rate that you paid (providing evidence to prove the rate e.g. card statement or a currency exchange receipt) or use www.oanda.com to convert each receipt using the exchange rate applicable for the date the expense was actually incurred.

**Submission of claim**

Print, sign and date the claim in the ‘signature of claimant’ box, attach any receipts and then return to the Faculty CQA Team at the University who will check the form has been fully completed, add the finance coding and arrange for the appropriate budget holder in the Faculty to sign the form.

Once authorised by the budget holder and the finance approver, fully completed forms will be returned to Payroll,

Room 3083, Building 37, Highfield Campus, Southampton, Hants SO17 1BJ.

**Privacy Statement**

The University of Southampton will only use the data you provide in this form to make a payment to you. Personal data you provide will not be shared with any third party for a separate purpose unless either the law requires us to do so, or you give us your consent to do so. For further information about how we safeguard personal data at the University, please view our privacy policy at <https://www.southampton.ac.uk/legalservices/what-we-do/data-protection-and-foi.page>, and any relevant privacy notice provided to you.

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| **For the CQA Team checking only** |

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| I have checked this claim for completeness, accuracy and compliance against the Financial Regulations, Policies and Procedures. | | |
| **Signed** | **Print name** | **Date** |