

Nursing and midwifery students – placement expenses claim form

Your nursing and midwifery bursary includes £5 for travel for each day of your course. You can therefore only claim for placement travel which costs more than £5 a day, using the cheapest ticket possible. You cannot claim for normal daily travel to and from your University or for normal day to day living expenses

What expenses will we pay?

Travel: we will only pay mileage claims for travel by car in the following exceptional circumstances.

- If there is no public transport available to get you to and from your placement; or
- If you are on a community placement **and** have used your car for patient visits following agreement from your University; or
- If you are claiming a small amount of mileage in order to reach nearby public transport

If you expect your travel costs to be more than £30 each day, you should stay in local accommodation wherever possible.

When claiming for patient visits you must include details of your community visit route in the “journey, provider and ticket type details” ie in the case of rural areas include the villages/towns visited or in city areas include post codes

If you wish to use private transport for your own convenience, you can, but you can only claim the cheapest cost of travel by public transport.

When using public transport, you must purchase the cheapest suitable ticket, for example, student tickets and weekly/monthly passes. If you claim more than the cheapest fare, we will restrict your claim where appropriate. We only require to see receipts for flight and ferry travel costs. However you should keep your receipts for other travel methods as evidence in the event of a dispute over the actual ticket cost.

Accommodation: You can claim for accommodation costs if you have to live away from home or a term-time address whilst on placement. You must only claim the cheapest accommodation available to you. If you incur costs while staying with family and friends, we will pay you up to a maximum of £15 each night. **In all cases, you must send us receipts for the accommodation.**

Please note: You can only claim travel from your home/term-time address to your placement accommodation. We will not pay travel costs between your placement accommodation and placement address. You should therefore seek accommodation as close as possible to your placement address

What expenses will we not pay?

We will not pay:

- mileage where public transport is available, irrespective of personal circumstances; or
- airfares, unless your University is prepared to certify that the use of air transport is justified;
- or
- parking fees, taxi fares, tips, carriage of luggage, bicycles or pets; or
- meals whilst travelling or when staying away from home.

What should you do now?

You should fill in this form for the period of your placement. Please make sure you fill in the form correctly and that you sign and date it at section C. We will not accept any forms that you have altered using any type of correction fluid – please fill in a new form if you need to amend anything.

We will return any forms that you have incorrectly filled in or that you have not signed to your University. This will result in a delay in your claim.

You should then give the filled-in form to your University for the appropriate person to check and sign. **We must receive your claim form within 6 months of your placement end date. We are unable to process any claims you send us after this date.**

We will pay approved expenses claims into your bank account within 28 days of us receiving your claim. If you have any queries, please contact your University in the first instance, who will be able to advise when your claim was sent to us.

Data Protection Act 1998:

We will use the information you give on this form for the purpose of processing your claim. We have a duty to protect the public funds we handle and we use the information you have provided on this form to prevent and detect fraud. We may also share this information, for the same purpose, with organisations that work with us to prevent and detect fraud.

Section A – Your Personal Details

Name Date of Birth / /

SAAS reference number

University Course

Year

Address travelling from: (Please tick)

Home

Term time

Name and address of placement inc postcode

Section B: Summary of claim

Travel Total no of days travel **

Accommodation

Total *

Section C: Declarations - we will return this form if either of the declarations are not signed.

Student declaration

The information I have given on this form is complete and accurate to the best of my knowledge and belief. I understand that if I give you false information, or incomplete information, you may prosecute me and withdraw my support. I also understand that you make payments on a claim by claim basis, irrespective of previous claims. I agree to repay any amount that I have received which is more than the amount due to me.

Your signature Date / /

Section C Continued:

University declaration

I confirm that the student named on this form is required to spend the period detailed on this form away from his or her place of study for the purpose of practical placements and this is a necessary part of his or her nursing or midwifery course. I also confirm I have checked the expenses claimed are reasonable and in line with the notes of guidance.

1. Total payment (total amount in *)	<input type="text"/>
2. Daily travel amount deducted (£5 per placement days claimed in **)	<input type="text"/>
3. Total payment due (section 1 – section 2)	<input type="text"/>

Name of University

Signature Date / /

For our use only:

Approved by Date / /

Details of travel and accommodation costs claimed in Section B

Date	Method of travel	Car Miles @ 40p (Please state if any of these are patient visits)	Journey, provider and ticket type details	Shift times	Travel cost
		<u>PV</u>			
		<u>PV</u>			
		<u>PV</u>			
		<u>PV</u>			
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		<u>PV</u>			
		<u>PV</u>			
		<u>PV</u>			
		<u>PV</u>			
Total					

Date	Details of accommodation	Accommodation cost
Total		

Continue on a separate sheet if necessary.

Date	Method of travel	Car miles @ 40p (Please state if any of these are patient visits)	Journey, provider and ticket type details	Shift times	Travel cost
Total					