****

# Instrumental Tutor Claim Form

**This section should be completed by the Instrumental Tutor.**

**Please ensure that all sections are complete otherwise payment may be delayed.**

Name and Title (Dr/Mr/Mrs and so forth):Click or tap here to enter text.

Employee Number (if known):Click or tap here to enter text.

National Insurance Number:Click or tap here to enter text.

Address:Click or tap here to enter text.

Note: Income tax will be deducted at basic rate and National Insurance contributions will be deducted if applicable.

|  |  |  |
| --- | --- | --- |
| Name of Student | Hours | Dates of Tuition |
| Please insert name of student | Please insert hours | Please insert the dates of tuition |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Total Hours Claimed | Please insert total hours claimed |  |

Signature of Tutor (e-signature or typed signature):

Date:Click or tap here to enter text.

Line Manager:Click or tap here to enter text.

Department:Click or tap here to enter text.

**This section is to be completed by the Head of School.**

Checked and approved as a charge against the Tutors’ allocation to my School.

Nominal Code (10 characters):Click or tap here to enter text.

Project Code (if applicable):Click or tap here to enter text.

Signature of Budget Holder (e-signature or typed signature):

Date:Click or tap here to enter text.

**For Finance Use Only**

|  |  |
| --- | --- |
| **E&D:**Click or tap here to enter text. | **Hours:**Click or tap here to enter text. |
| **E&D:**Click or tap here to enter text. | **Hours:**Click or tap here to enter text. |
| **Entered by (initials):**Click or tap here to enter text. | **Date:**Click or tap here to enter text. |
| **Checked by (initials):**Click or tap here to enter text. | **Date:**Click or tap here to enter text. |

Please email completed form to [Salary Claims](mailto:salary.claims@yorksj.ac.uk).