UNIVERSITY OF BIRMINGHAM

SELF EMPLOYMENT CLAIM FORM
(ONLY TO BE COMPLETED BY INDIVIDUALS WHO MEET THE UNIVERSITY'S SELF EMPLOYMENT RULES & CRITERIA OR WORKERS WHO ARE BASED OVERSEAS & CARRY OUT ALL THEIR DUTIES OVERSEAS)

SECTION 1: Personal Details (All boxes to be completed in block capitals)
N.B. Please refer to guidelines before completing this claim as any omissions will result in the form being returned and the payments delayed.

										Finance Office Ref								
National Insurance No										Dept/School for whom work completed								
Surname																		
Forename										Bank Name								
Title		Gender								Sort Code								
Date of Birth										Account Number								
Email Address:																		

Home Address:	Account Codes			£ Amount	p
					.
					.
					.
					.
			Total		.

SECTION 2: DETAILS OF PAYMENT TO BE PAID

DESCRIPTION OF DUTIES UNDERTAKEN			£	p
Dates of Engagement From	To			

In submitting this form the Authorising Signatory certifies that the above individual has completed the duties specified, and accepts that if for any reason the costs of this post cannot be met from the source/s identified above, the College will be responsible for meeting the costs from an alternative account.

Claimants signature ……..

Date …….

Authorising Signatory ……

Name …… ….. …….

Date……Ext No. ……