**Pay Rate (Office use only) – please tick**

□ External Examiner duties (hourly rate £14.40 including holiday pay element)

| Cost Centre | Activity | Job Code | Account Code |
| --- | --- | --- | --- |
| QUN | N/A | N/A | 50021 |

□ Annual Report submission and completion (hourly rate £26.66 including holiday pay element)



| **Title** |  | **Forename** |  | **Surname** |  |
| --- | --- | --- | --- | --- | --- |
| **Pay ref No. (if known)** |  | **NI** **Number** |  |

| **Date incurred** | **Programme/****Module code**  | **Details of duties/expenses**For each line of your claim please outline the activities undertaken and specify the expense incurred (*e.g. train fare*, *moderation, attendance at boards, other duties…)*Please attach all receipts. | **Please state hours below***(Payroll -1400 & 1401)* | **Annual Report****Please state hours below**Full day 7.5 hours*(Payroll-1403 & 1402)* | **Expense amount***(Payroll- 1225)* | **Fee** **amount** |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  | **Sub-total** |  |  |
|  |  |  |  |  | **Total** |  |
| **Claimant Signature** | **Date**  | **Authorised by Budget Holder** | **Date** |
|  |  |

Please submit your completed form, with receipts to externalexaminers@edgehill.ac.uk or Governance, Quality Assurance and Student Casework, Edge Hill University, St. Helens Road, Ormskirk, Lancashire, L39 4QP.