



DEMONSTRATOR FEE CLAIM FORM

INSTRUCTIONS:

The claim form attached must be completed for all payments to be made via the **Subsidiary Payroll**.

PART ONE: to be completed by the *Demonstrator*.

PART TWO: to be completed by the *School/Faculty Staff*.

Please note those claims paid on the Subsidiary Payroll are subject to regulations.

1. All claims are processed on the monthly payroll and cut off dates apply.
2. If a claim is received, completed in FULL before the cut-off date it will be paid in the next payroll.
3. Payments are made to nominated banks on the last Thursday of the Calendar month, with the exception of December which can be several days earlier.
4. It is the responsibility of the claimant to complete a Starter Declaration for each claim to ensure tax allowances are correct.
5. Save files as a PDF and ensure naming complies with instructions, e.g. BLOGG A DEM SEP 2020. With more than one claim, add the number of claim in the file name, e.g. BLOGG A DEM SEP 2020 2

DEMONSTRATING CATEGORIES

There are three categories of Demonstrating and for some of the categories a multiplier is to be applied to compensate for preparation time. The table below includes details of the three categories, the rate of pay and the multiplier that will be applied.

	Summary	Hourly Rate	Multiplier
Category 1	To facilitate student learning, typically in a seminar or tutorial setting, under the supervision of a member of academic staff (includes the development of teaching materials) .	£12.57	2
Category 2	To facilitate student learning, typically in a seminar or tutorial setting, under the supervision of a member of academic staff using existing teaching materials .	£12.57	1.5
Category 3	To facilitate laboratory, workshop or fieldwork setting, under the supervision of a senior academic colleagues. To mark and assess scripts.	£12.57	No multiplier

You must agree the category of Demonstrating with your Head of School prior to commencing the Demonstrating.

ADDITIONAL CHECKS:

These checks will assist in processing your claim and reducing times in resolving queries, should any key information have been omitted.

1. *Cost Centre and Analysis Code
2. *Individual dates of work completed
3. *The Claimant's signature
4. *The Authorized approval signature and extension number
5. *The Administrator extension number

For processing email completed PDF to: subsid-payroll@ulster.ac.uk
RETAIN a copy of the claim for your own records.



DEMONSTRATOR FEES

PART ONE:

Claimant Details (to be completed by student)

Faculty / School: CAMPUS:
 Surname: Forename: Title:
 National Insurance No: Date of Birth:
 Address:
 Post Code:

Claimants Bank Details (to be completed by claimant)

BANK / BUILDING SOCIETY DETAILS:

Bank Name:
 Bank Address:
 Sort Code: Account No:

Please Note: All of the above details must be completed for each claim submitted in order to ensure prompt payment.

IBAN / SWIFT / BIC / NSC should be completed for all Non- UK bank accounts

IBAN: SWIFT / BIC:
 NSC: ROUTING:

CLAIM DETAIL (to be completed by claimant)

*Date (Please provide each date separately)	*ESSENTIAL Cost Centre / Analysis Code e.g. 11000U / 21800	Course & Module	Category (see table above) (eg 1/2/3)	No. of Hours Worked	Multiplier (eg 1/1.5/2)	Total Hours to be Paid <i>*see note below</i>
Total						

***Note:** The column marked 'Total hours to be paid' is inclusive of the multiplier

Example One: if you deliver a 2 hour tutorial in category 1, the figure in the column marked 'Total hours to be paid' should be 4.
Example Two: if you deliver 2 hours facilitating a laboratory demonstration in category 3, the figure in the column marked 'Total hours to be paid' should be 2.

TOTAL HOURS **TOTAL AMOUNT £**..... (Total hours x £12.57)

* I certify that I have carried out the duties detailed below.

***Signed:** (CLAIMANT) **DATE:**

PART TWO: Payment Authorisation

I confirm that the claimant requires payment.

Please pay (Total amount requested to be paid) £

Cost Centre and Analysis code (please specify)

COMPLETED BY: (PRINT NAME) **Extension No:**

(School / Faculty Office) **Date:**

Email Address:

APPROVED BY: (PRINT NAME) **Extension No:**

(SIGN NAME) **(Authorised Signatory) Date:**

Email Address:.....

Notes for School Staff:

1. This form should be sent in electronic format to Salaries and Wages: subsid-payroll@ulster.ac.uk
2. Save files as a PDF and ensure naming complies with instructions, e.g. BLOGG A DEM SEP 2020. With more than one claim, add the number of claims in the file name, e.g. BLOGG A DEM SEP 2020 2
3. Attach an electronic copy of the Starter Declaration Form for tax purposes.
4. Keep a copy of the form and supporting documentation for your records.