



## Expense Reimbursement Form for RCS Students

This form is to be used by **students** claiming reimbursement for **relocation expenses**. Receipts, tax invoices and other relevant documentation must be attached to this form. Once completed, forward to your School/Unit Administrator.

<b>Name</b>		<b>Claim Description</b>
<b>Student ID</b>		
<b>School/Dept/Unit Name</b>		

<b>Item Description</b>	<b>Why was the purchase made?</b>	<b>AUD Amt (incl GST)</b>
<b>TOTAL</b>		

<b>Charge Claim To</b>				
<b>Percent</b>	<b>Fund</b>	<b>Department</b>	<b>Project Code</b>	<b>Project Name</b>

**Student Payment Details (this section is to be completed by students only)**

<input type="checkbox"/> <b>EFT</b>	<b>Bank Name</b>	
	<b>Branch Name</b>	
	<b>BSB</b>	
	<b>Bank Account Number</b>	

**Claimant Declaration**

I declare that:

1. The expenses were for UNSW Medicine relocation allowance for allocation in to Rural Clinical School Campuses for Phase 2 or Phase 3 in Medicine.
2. All receipts and tax invoices are attached.
3. This is the only claim I have made, or will make, for these expenses.
4. Payment Details provided are correct if I am a student claiming reimbursement of expenses.

<b>Claimant's Signature</b>		<b>Date</b>	
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**Expense Claim Approval**

The Claimant's Declaration is accurate in all aspects and is in accordance with UNSW Policy.

<b>Approver's Name</b>		<b>Signature</b>		<b>Date</b>	
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