



## Repayment of Learner Expenses

**Before submitting your claim for expenses, please ensure you have completed an Application for Financial Assistance Form and provided your bank details.**

**Student Name**

**Age Group**

**Address**

<b>16-18</b>		<b>19+</b>	

**Full title of course**

**Reason for claim:**

e.g. Normal Travel or Work Placement

**Mode of transport**

**Public Transport**

(please attach used tickets)

**Own transport**

(20p per mile)

**Dates of Attendance Sessions in Academic Year 20.... /20....**

	Dates of Travel	Dates of Travel	Dates of Travel	Dates of Travel	Lecturer's Signature
<b>MONDAY</b>	__/__/__	__/__/__	__/__/__	__/__/__	
<b>TUESDAY</b>	__/__/__	__/__/__	__/__/__	__/__/__	
<b>WEDNESDAY</b>	__/__/__	__/__/__	__/__/__	__/__/__	
<b>THURSDAY</b>	__/__/__	__/__/__	__/__/__	__/__/__	
<b>FRIDAY</b>	__/__/__	__/__/__	__/__/__	__/__/__	

**Summary of claim:**

No of Return Journeys	Cost per Return Journey		Amount Claimed	
	£	p	£	p
<b>TOTAL CLAIMED</b>				

**Declaration: I hereby declare that the above information is correct.**

Signature of Student:

Date

Certified Correct/Payment:

Date