



NQ Verification and Approvals Claim for Fees and Expenses

Please refer to 'Appointee Terms and Conditions', which can be found at www.sqa.org.uk for conditions and rates applicable.

NI Number

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 Name _____

Address _____

Postcode _____

Reason for claim (e.g. Verification, Approval, Prior Verification)

Verification Group Name/number

Centre name/number

Time spent on activity

Were duties carried out in employer's time (Yes/No)
(if yes, a TR form will be sent to you in due course)

Subsistence/Other Necessary Expenses (receipts must be provided for ALL expenses)

Date	Details	
		£
		£
Total Overall Expenses		£

I declare that I have actually and necessarily incurred all the expenditure and subsistence detailed above, that the mileage allowances charged are in strict accordance with the rates determined by the Scottish Qualifications Authority and that the travelling and incidental expense charges have been actually disbursed by me solely on SQA business.

Signature _____

Date _____

For Office Use

Cost Centre	Hours Employers time	Hours Own time	Total Fees	Total Expenses	Entered by	Checked by