INDIVIDUAL SPECIALIST WORKFORCE CLAIM FORM

Secondary Examinations – Exam Setting

NEW ZEALAND QUALIFICATIONS AUTHORITY
MANA TOHU MĀTAURANGA O AOTEAROA

QUALIFY FOR THE FUTURE WORLD
KIA NOHO TAKATŪ KI TŌ ĀMUA AO!

2015 v3.0

Instructions:

1. Please complete sections one to four on this claim form
2. If you are a GST registered individual taxpayer you must supply a tax invoice with this claim
3. If you are claiming for work which relates to more than one contract, please complete a separate claim form for each piece of work
4. Limited Liability Companies must supply a tax invoice; this claim form should **NOT** be completed

SECTION ONE: PERSONAL DETAILS

Note: If this is the first time that you have been paid by NZQA, you will need to complete an IR330 and provide verified bank details

Name:		**Contact No:**	
Address:		**Email:**	
		IRD No:	

SECTION TWO: ***Complete appropriate boxes***

Subject / Standard(s):		**Year of Examination:**	

☐ **NCEA level one**	☐ **NCEA level two**	☐ **NCEA level three**	☐ **Scholarship**

☐ **Examiner**	☐ **Materials Developer**	☐ **Materials Critiquer**	☐ **Independent Checker**	☐ **Subject Matter Checker**	☐ **Other:**

SECTION THREE: CLAIM DETAILS (Please refer to your contract for the specifics about what you are entitled to claim)

Note: Please staple invoices/receipts/hotel accounts and any relevant work logs to this claim form (if relevant)

Date	Claim Details (please enter relevant details of your claim below)	Amount ($)
	Fees:	
	Examiner Fee 1 (after final draft submitted, include work log):	
	Examiner Fee 2 (after print ready version is approved, include work log):	
	Materials Developer Fee (after final draft submitted, include work log):	
	Materials Critiquer Fee 1 (after final draft submitted):	
	Materials Critiquer Fee 2 (with submission of MC Stage Two report):	
	Independent Checker Fee:	
	Subject Matter Checker Fee:	
	Meeting/Training Fee (include purpose and date):	
	Other Fees (written pre-approval required):	
	Expenses:	
	Mileage: kms@74cents per km	
	Total (Including GST if applicable):	

SECTION FOUR: DECLARATION (I certify that this claim is correct and in accordance with the terms of my contract with NZQA)

Signature: _____ Date: _____

NZQA USE ONLY **Date Received:** _____

Initial/Date	First Approver			Second Approver			Third Approver		

Cost Centre	Activity	GL Code	Resource	Project Code		Value
3 2 2	3	3 1 1 0	3 0			$
3 2 2	3	3 1 2 0	3 0			$
3 2 2	3	5 1 1 9	3 0			$
				Total Value:		$

Manager's Name: _____ **Signature:** _____ **Date:** _____