



## RCNI Foróige Module in Real U training Co-Training Expenses Claim form\*

Name of Trainer: \_\_\_\_\_ Name of RCC \_\_\_\_\_

Is the RCC trainer working (please tick box): within contracted RCC hours  working outside of RCC contracted hours?

Name of Youth Worker: \_\_\_\_\_ Organisation \_\_\_\_\_

Location of Training: \_\_\_\_\_ Dates of Training \_\_\_\_\_

Number of Trainees: \_\_\_\_\_

Expenses being claimed \*\* \_\_\_\_\_

Hours being claimed \*\*\* \_\_\_\_\_

Total Claimed: \_\_\_\_\_ Signature of Claimant: \_\_\_\_\_ On behalf of \_\_\_\_\_ Self/Rape Crisis Centre.

Date submitted: \_\_\_\_\_ (please submit within one month of training)

Electronic Payment Only: Submit Bank Details. Account Number: \_\_\_\_\_ Sort Code: \_\_\_\_ \_\_\_\_ \_\_\_\_ Account Name: \_\_\_\_\_

\*see Guidance notes on completing RCNI Foróige module co-training claim form

### **\*\*Expenses**

**Travel per Mile:** .90c p/m or .56c p/k (as per policy item 2)

**Public Transport/taxi:** to be used where possible for the full journey or for the majority of journey' (as per policy item 2)

**Childcare:** €30.00 max up to age 16 years (as per policy item 6)

**Day Subsistence:** €15.00 euros max (policy item 4)

### **\*\*\*Hours**

€25 per hour training: Preparation or travel time is not included.

**ALL CLAIMS HAVE TO ACCOMPANIED BY RECEIPTS**