

## Specialist Training Fund for HST/ST3-8/GP3-4 Reimbursement Form

| Applicant Details                 |                              |            |                          |
|-----------------------------------|------------------------------|------------|--------------------------|
| Surname                           |                              | First Name |                          |
| Trainee Number                    |                              | Specialty  |                          |
| Mobile Number                     |                              | Email      |                          |
| Do you hold a NCHD Contract 2010? | Yes <input type="checkbox"/> | No         | <input type="checkbox"/> |

| EVENT / COURSE<br><i>Only events/courses attended between July 2014 – July 2015 accepted</i>   |   | Certificate of Attendance Attached |    |
|--|---|------------------------------------|----|
| Event/Course Name  |   | YES                                | NO |
| Location / Organiser   |   |                                    |    |
| Event/Course Date  |   | Receipt Attached                   |    |
| Event/Course Fee (in Euros)  |   | YES                                | NO |
| Mileage<br><i>*See HSE travel policy for motor rates</i><br><a href="http://www.hse.ie/eng/staff/Benefits_Services/Travel_Subsidence/Travel_Subsidence_Rates/">http://www.hse.ie/eng/staff/Benefits_Services/Travel_Subsidence/Travel_Subsidence_Rates/</a>                    | Number of Kilometres Travelled:<br>.....<br>Number of km travelled @ 0.4011 per km* =<br>€  | N/A                                |    |
| Train/Bus/Taxi   | €   | YES                                | NO |
| Air (Economy flights only)   | €   | YES                                | NO |
| Accommodation (in Euros)<br><i>*See HSE accommodation policy for rates.</i><br><a href="http://www.hse.ie/eng/staff/Benefits_Services/Travel_Subsidence/Travel_Subsidence_Rates/">http://www.hse.ie/eng/staff/Benefits_Services/Travel_Subsidence/Travel_Subsidence_Rates/</a> | Number of Nights:<br>.....<br>Rate paid per Night*:<br>.....<br>Total Accommodation Cost: € | YES                                | NO |

| EQUIPMENT - <i>Medical Equipment/Textbooks required as part of training programme purchased between July 2014 – July 2015</i> |   | Receipt Attached |    |
|---|---|------------------|----|
| Name/ Description   |   | YES              | NO |
| Cost  | € |                  |    |
| <b>TOTAL</b>  | € |                  |    |

I declare that:

- all particulars stated on this form are complete, true and correct.
- If I make a false claim I will be required to repay all monies in full and the fund be withdrawn
- I have paid all expenses claimed
- in respect of expenses claimed on this form, all refunds received to date from any source are shown
- to the best of my knowledge no part of these expenses will be voluntarily reimbursed to me

|                       |  |
|-----------------------|--|
| Signature of Trainee: |  |
| Date:                 |  |

**RETURN COMPLETED FORM TO POSTGRADUATE TRAINING BODY**

*RECEIPTS AND CERTIFICATE OF ATTENDANCE MUST BE SUBMITTED WITH FORM*

## Notes:

Prior to submitting a reimbursement form, applicants are advised to read “Specialist Training Fund for Higher Specialist Trainees – Guidance Document for Trainees, Training Body Personnel and Employers – October 2014”

### The Specialist Training Fund is available to:

- SpRs/SRs/ST3-8 and 3<sup>rd</sup>/4<sup>th</sup> year GP trainees who are actively participating in a higher specialist training programme and who hold an NCHD Contract 2010
- SpRs/SRs/ST3-8 and 3<sup>rd</sup>/4<sup>th</sup> year GP trainees who are on the HSE-supported Dr. Richard Steevens’ Scholarship and HSE-HRB supported National SpR/SR Academic Fellowship Programme

Applicants can apply for funding in respect of financial liabilities incurred between the dates Monday, 13<sup>th</sup> July 2014 to Monday 13<sup>th</sup> July 2015. **Applications received in relation to expenses incurred prior to 13<sup>th</sup> July 2014 will not be considered.**

*Please note this fund is not available during out of programme/research years*

### The Specialist Training Fund can be used:

- to support their participation in relevant educational and training events
- to support the purchase of specialist medical equipment specifically required as part of their HST training programme
- textbooks

### The Specialist Training Fund cannot be used:

- to further subsidise trainees in educational activities for which the HSE already has separate arrangements in place e.g. contribution toward defined examinations and clinical courses – see the NCHD Clinical Courses Refund Scheme document ([www.hse.ie/doctors](http://www.hse.ie/doctors)).
- to pay for or subsidise educational activities which are funded via the Agreements in place between the HSE and the individual training bodies regarding the provision of specialist medical training;
- for the purchase of on-line resources, software, lap tops, palm pilots or any other hardware and
- for programmes/training modules provided directly by local employers, for example Infection Control training courses

Expense claims made for travel and subsistence will be considered in line with HSE Guidelines and will be reimbursed at public sector rates. Claims for mileage expenses will only be approved where no suitable public transport (e.g. train or bus) is available or where public transport is available only at equal or greater expense.

### Audit

A percentage of the claims made to the specialist training fund will be audited annually.

**Return the completed form to your postgraduate medical training body.**