## THE UNIVERSITY OF SOUTHERN QUEENSLAND



## **CLAIM FOR PROFESSIONAL EXPERIENCE ALLOWANCES**

## **SITE COORDINATOR**

**INTRUCTIONS:** Please complete and sign this claim form within 4 weeks of completion of a **domestic Professional Experience placement** and forward on to the University.

Please note, you are not required to complete this form if you supported a student/s undertaking their placement while on a Permission to Teach (PTT). For more information please contact us.

Please ensure all areas of the form are completed fully to avoid delays in processing, some claims may take up to 6 weeks from processing to payment. Claims should be sent via email to: <a href="www.will.payments@usq.edu.au">wil.payments@usq.edu.au</a>

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Personal Details								
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First Name:								
Surname:								
Former name/s (if a	applicable):							
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