**APPRENTICE/TRAINEE REIMBURSEMENT OF EXPENSES**

**Apprentice/Trainee Name:**

**Apprentice/Trainee Email:**

(This is where Remittance advice will be sent)

**Host Employer:**

**Field Officer:**

1. Is this request for reimbursement for expenses incurred during travel?

[ ]  YES, please indicate dates of travel:

[ ]  NO, skip to 3 – Expenses to be reimbursed.

1. Have you previously submitted a Request for Reimbursement form for this travel period?

[ ]  YES, HTN Admin to verify eligibility for the below reimbursement claim.

[ ]  NO

1. Expenses to be reimbursed (***please attach all relevant documentation of expenses to this form***).

|  |  |
| --- | --- |
| **DESCRIPTION** | **AMOUNT** |
|       |       |
|       |       |
|       |       |
|       |       |
| **Total Reimbursement Required $** |  |

**Reimbursement Details**

Once approved by your Field Officer, scan and email to admin@htn.com.au. Reimbursements will be paid by Accounts every Friday so please ensure that your approved reimbursement form and relevant documents e.g. receipts are sent to HTN Admin by 5pm on Tuesdays. A Remittance advice will be sent to your nominated email address once reimbursement has been processed.

**For your request to be processed, please provide Accounts with your bank details**

|  |  |  |  |
| --- | --- | --- | --- |
| Bank: |       | BSB: |       |
| Account Number: |       | Account Name: |       |

Apprentice/Trainee Signature: Date:    /    /

Field Officer Signature: Date:    /    /

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| --- |
| **HTN ADMIN USE ONLY** |
| ONCHARGE DETAILS: | WF1 Client ID:       | Approval / Extract from Contract Attached: [ ] (Verbal Approvals are not acceptable) |
| Entitlement Verified: [ ]  |