



**SHIRELAND**  
COLLEGIATE ACADEMY TRUST

Shireland Collegiate Academy Trust Policy

# Reimbursement of Governance Travel Expenses

<b>Committee and Date Approved</b>	Resources Committee – Summer 2024
<b>Category</b>	Statutory – DfE
<b>Next Review Date</b>	Annually unless change in legislation – <b>Summer 2025</b>
<b>Policy Availability</b>	Trust Website
<b>Officer Responsible</b>	CSO & CFO

**The Trust, all Academies within the Trust and Shireland Learning Limited must  
comply with this policy.**

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## Introduction

The Memorandum and Articles of Association of Shireland Collegiate Academy Trust, permits the payment of remuneration and out of pocket expenses to Members, Trustees and Members of the Standards and Performance Committee provided that:

- The remuneration or other sums paid to the Member, Trustee or Member of the standards and performance Committee do not exceed an amount that is reasonable in all the circumstances

To ensure all Members, Trustees and Members of the Standards and Performance Committee are aware of this right and have a process to access this if they choose to do so we have produced the following guidance and forms.

## Guidance for Completion of Claim for Expenses

All claims for any type of expenses must be submitted on form GOV01 where applicable. Claims will only be accepted within the Academic year to which they apply.

Members, Trustees and Members of the Standards and Performance Committee will be reminded at the last meeting of the academic year of their right to submit expenses.

All relevant information must be completed on the form, including home to destination mileage. This is to ensure the correct mileage is claimed, where Members, Trustee and Members of the Standards and Performance Committee do not travel from home, a note should be made on the form under the "Destination" heading.

The Governance Officer will be the certifying officer and, in this role, must ensure the dates expenses are claimed match to the dates of attended meetings.

Where Car Mileage is to be claimed the form must clearly show the type and engine size of the vehicle.

The rate claimed per mile will be in line with current Inland Revenue Authorised Mileage Rates, shown at [www.hmrc.gov.uk/rates/travel.htm](http://www.hmrc.gov.uk/rates/travel.htm)

## Current Rates and Allowances

<b>Vehicle</b>	<b>Approved mileage rates First 10,000 business miles in the tax year</b>	<b>Each business mile over 10,000 in the tax year</b>
Cars and vans	45p	25p
Motor cycles	24p	24p
Bicycles	20p	20p

The number of miles being claimed for each journey should be shown, and the name of any passenger if the higher rate of car mileage is to be claimed.

All other modes of transport such as bus, rail, metro, subway and parking fees should be shown on the form at the value expended with relevant receipts attached. Please note, parking fines will not be reimbursed.

The completed form should be returned to the Governance Officer who will pass all certified claims to the Finance Officer, who will then calculate the amount to be paid for in line with the Inland Revenue rates.

The Finance Officer, once happy that all relevant information has been received, will process the claim for payment. Please ensure claimants bank details are provided when submitting a claim as payment will be made by BACS.

Please note this form is only intended for travel expenses, if any other type of expenses is incurred, please refer to the Chief Financial Officer for clarification as to how this can be supported.

**Please return completed forms to:**

FAO Governance Officer  
Shireland Collegiate Academy Trust  
Shireland Collegiate Academy  
Waterloo Road  
Smethwick  
West Midlands  
B66 4ND

## GOVERNANCE TRAVEL COSTS & MILEAGE ALLOWANCE CLAIM FORM

MEMBER/TRUSTEES/MEMBER OF SPC DETAILS	CLAIM DETAILS
Name: _____  Home Address: _____  _____  Academy location: _____  Home to Academy Mileage: _____  Bank Name: _____  Sort Code: _____ - _____ - _____ Account Number: _____	Total number of return journeys _____  Total Cost: _____  <hr/> <b>VEHICLE DETAILS</b>  Vehicle Registration: _____  Vehicle Model: _____  Capacity: _____

**IMPORTANT – YOU MUST READ THE FOLLOWING NOTES BEFORE COMPLETING THIS CLAIM:**

1. **Public Transport:** The rate for travel by public transport shall not exceed the amount of the ordinary fare or any available cheap fare, and where more than one class of fare is available the rates shall be determined by reference to first class fares.
2. **Car Mileage:** The Mileage Rate claimed shall not exceed the Inland Revenue Authorised Mileage Rates ([www.hmrc.gov.uk/rates/travel.htm](http://www.hmrc.gov.uk/rates/travel.htm)). The rates may be increased:
  - (a) In respect of the carriage of each passenger (not exceeding 4) to whom a travelling allowance would otherwise be payable – these increased rates to be as the rates set by the Inland Revenue.
  - (b) By not more than the amount of any expenditure incurred on tolls, ferries or parking fees. (Parking fines will not be reimbursed).
3. **Certification:**
  - (a) Governance Officer should certify the claims for each meeting.
  - (b) The Person certifying must have attended the meetings in question or be in a position to confirm the claimants attendance at the meeting and the attendance of any passengers for which a higher rate of mileage has been claimed.

**SIGNATURE OF MEMBER/TRUSTEE/MEMBER OF SPC:**

I claim travelling expenses as a Member/Trustee/Member of the Standards and performance Committee for the meetings stated overleaf.

I declare that:

- (a) I have necessarily incurred expenditure on travelling.
- (b) I have actually paid the fares/expenses claimed.
- (c) The statements are correct and I have not and will not make any other claims in respect of travelling, in connection with the above duties.
- (d) I have read the notes and have completed the relevant sections.

**Signature of Claimant:** .....

**Date:** .....

**Signature of Certifying Officer:** .....

**Name of Certifying Officer:** .....

**Date Processed for Payment:** .....

### Claim Details

DATE	DESTINATION	PURPOSE	MILEAGE	NAMES OF PASSENGERS	Car Mileage (mileage x rate)	Taxi (cost)	Rail (ticket price)	Other, Please state including cost	Additional expenses and costs
<b>Totals</b>									
CONTINUE ON SEPARATE SHEET IF NECESSARY					<b>Total of all expenses</b>				