

School of Education

2025 Supervising Teacher Pay Claim Form

to be forwarded within 20 working days at end of placement period

School of Education	Placen	nent period:		to		
1 Personal Details Claimant's Surname			2 School D	ı		
First Name D.o.B.			School Address			
Home Address						
Phone No.						
Email						
3 Claim Details: FOR	SUPERVISED PLACE	EMENTS <u>FROM JAN</u>	UARY 2025 ON	I <mark>LY</mark> - (days will be aut	to-calculated base	ed on Course Code)
Course Code *TTT = Turn To Teaching courses		f Days No. of Pre-So Teacher	ivailie/.	of Pre-Service Teac	hers Supervised	Supervision % (1 = 100%; 0.5 = 50%)
	Pr	e-Service Te	V UQ Use Only			
				Department of Education, I to be paid to 'general' sci BSB Number Account Number		ermitted to be made to
				Account Number		
(5) Certification Supervising Teac	cher: pove details are corre	ect. Signature			D	ate
(6)	Declaration forms		turn with this for	m to the email below.		
· ·	to: pracpayclaims				enquiries to: 07 y take 4-6 weeks to p	
UQ Use Only						
Aurion No:	Employee No:		Date Processed	:	Date Approved:	

CRICOS No. 00025B Feb 2025