

Once-Off Payment Authorisation Form

Complete this form for once off payments e.g. Visits/Events/Lectures/Workshops/Open Days.

1.	Applicant's Information:	
1.1	PPS Number (<i>mandatory</i>):	
1.2	First Name:	
1.3	Surname:	
1.4	UCC Staff Number (<i>if available</i>):	
1.5	UCC Student Number (<i>if available</i>):	
1.6	Date of Birth: (<i>mandatory if PPS Number is not available</i>)	
1.7	Email Address:	
1.8	Mobile Phone Number:	
1.9	Home Address:	
1.10	Eircode / Postcode:	

2.	Event Details:	
2.1	School / Department:	
2.2	Title of Event:	
2.3	Date of Event:	
2.4	Location of Event:	
2.5	Number of Hours (<i>if applicable</i>):	
2.6	Hourly Rate Hourly (<i>if applicable</i>):	
2.7	Annual Leave Entitlement (<i>8% of total hours</i>):	
2.8	Total Payment due to Payee (<i>incl Annual Leave Entitlement</i>):	

3.	Funding:		
3.1	Cost Code Information:	Cost Centre:	Project:
		Cost Centre:	Project:

4.	Bank Details: (<i>To be completed by employee</i>)	
4.1	Bank Name:	
4.2	Name on Account:	
4.3	IBAN:	

5.	Authorisation:			
	I confirm that the above payments comply with the policy on out of hours working and additional payments to staff:			
5.1	Signature of Head of School/Department: (<i>or nominee</i>) (<i>original or digital</i>):		Date:	
5.2	Signature of Employee:		Date:	