

Input by: _____ Date: _____

Checked by: _____ Date: _____

Request Form for Contractor/Independent Panel Member

PART A

This form must be completed and returned to HR Services, Appointments Team before payment can be made to an External Contractor/Independent Panel Member.

For completion by Manager/Headteacher

Forename/s of Claimant:	
Surname of Claimant:	
Establishment if appropriate:	
Position title (E.G. Independent Panel Member/Contractor):	
Cost Centre Number:	
Other relevant information:	
Name of Authorising Manager/Headteacher:	
Signature of Authorising Manager/Headteacher:	
Date:	

Please Note

This process enables payment to be made to individuals who undertake Independent Panels/External Contracting. Please be aware that these records will be closed if inactive for a period of 18 months. Once the record is closed, this form will need to be completed again should you require to use this individual again.

Please return to the Appointments Team at the address below:

Derbyshire County Council
 HR Services
 County Hall
 Matlock
 Derbyshire
 DE4 3AG

Input by: _____ Date: _____

Checked by: _____ Date: _____

Request Form for Contractor/Independent Panel Member PART B

For completion by Independent Panel Member/External Contractor

<u>PERSONAL DETAILS</u>	
Forename/s:	
Surname:	
National Insurance Number:	
Date of Birth (This field is mandatory on the council's payroll system):	
Home Address:	
Contact Number:	
<u>BANK DETAILS</u>	
Name and Address of Bank/Building Society:	
Sort Code	
Account Number:	
Building Society Reference:	
Signature:	
Date:	

Please Note

You will be paid calendar monthly in arrears for the time you work. Salary is paid by Bank Credit Transfer on or before 25th of each month.

Privacy Notice

For information on how we use the information we collect from you, please see our privacy notice at www.derbyshire.gov.uk/council/gdpr/privacy-notice