

## Visiting Staff Payment Form

Please complete one form per subject area

☐ winter semester \_\_\_\_\_ ☐ summer semester \_\_\_\_\_

surname, name	date of birth	staff number LBV – if known
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address (zip code, city, street, house number, country)

IBAN	BIC
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Non-SEPA: Name of bank, address, country, account owner

subject area	course code/EDV-Nr.	semester hours / SWS	HdM degree program / Studiengang
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☐ HdMbudget\*    
 ☐ HdM bonus points\*    
 ☐ HS 2012/20/ Master 2016\*    
 ☐ other\*    
 ☐ external funding\*

cost center / project number\*: \_\_\_\_\_ (\* To be filled in by HdM staff responsible for the cost center/project)

### Specification

hours completed		Travel expenses		hours completed		Travel expenses	
date	semester hours	public transport*	kilometres driven by private vehicle	date	semester hours	public transport*	kilometres driven by private vehicle
Amount carried over				Total sum			

\*) Travel expenses for public transport can only be reimbursed on the basis of original hard copy receipts.

I hereby confirm that the above details are accurate and correct:

\_\_\_\_\_  
Date/Signature Visiting Staff / Lehrbeauftragte/r

### PAY AND REIMBURSEMENT RATES

Tuition/Teaching / Unterrichtsstunden 32,00 € / hour	€
Travel with public transport / 2nd class / Öffentliche Verkehrsmittel	€
Further costs for accommodation / taxi etc (please attach original receipts) / Weitere Kosten	€
Usage of private vehicle / Fahrten Privat-PKW (0,16 € per km)	€
Sum / Summe	€

I hereby confirm that the above details are accurate and correct. / Sachlich und rechnerisch richtig:

\_\_\_\_\_  
Date/Signature Academic Dean / Studiendekan