

Specialist Training Program (STP) Rural Support Loading (RSL) CLAIM FORM

Please report on items you have purchased under the Rural Support Loading allowance and include brief details for each item. Do not submit receipts with this Claim Form, but please retain receipts and all relevant documentation in the event of a future audit. **Note**: claims will only be processed for actual expenses incurred (not projected or estimated expenses) during the current reporting period.

Note:

RACMA may ask for further information and/or suitable evidence of expenses incurred by the setting or the trainee. The decision to accept or reject a claim is at the absolute discretion of the RACMA. Previous acceptance of a similar expense does not guarantee that it will be permitted.

Expenses eligible for Rural Support Loading funding

Expense	Comment			
Relocation costs	Flights, household removal, vehicle removal			
Accommodation costs	Rent, utilities. May include a written estimate of the rental value of accommodation owned by the facility and provided free of charge. Should be reduced by any amount of the expenses met by the trainee directly.			
Attendance at training courses, meetings, conferences	Flights, taxis, accommodation, registration and attendance charges at course, meetings and conferences related to Fellowship training.			
Broadband access / IT upgrade	Equipment, installation, software, relating to Fellowship training but not for the entire training site			
Research projects	Access to online library, laboratory equipment			
Resources	Materials related to the trainee experience in the location, e.g. textbooks journal subscriptions online training module registration costs related to Fellowship training. computer, tablet, software costs if required for the STP trainee (Claims for these items will only be permitted once every three years. The items claimed for under this clause must be made available for future trainees rotating through the STP position.) office equipment (filing cabinets, chair) for establishing a workstation for the STP trainee. This will only be paid for new STP positions.			
Video conferencing facilities	Equipment, installation, software utilised for Fellowship training in the location.			

Expenses NOT eligible for Rural Support Loading funding

Expense	Comment			
Trainee salary	Rural Loading funds will not be paid to 'top up' trainee salary. 'Travel time' to outreach clinics will not be approved.			
Supervisor or administrative salary or travel expenses	Rural Loading funds will not be paid for administrative or Supervisors salaries or travel expenses.			
Accreditation costs	Costs associated with the accreditation of the site as a training post or in preparing an Expression of Interest for STP funding are ineligible			
International travel for trainees	The Department of Health has specifically excluded international travel and attendance at training courses, meetings, and conferences held outside Australia			
RACMA training and examination fees	Rural Loading funds cannot be used to pay for training program or application fees or other College fees			
Internal hospital training	Training not related to the trainee's Fellowship Training Program (e.g. all-staff induction, OH&S) will not be funded.			

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STP Reference No:		Setting Name	
Period of claim:	Term 2 2020 (1 August 2020 - 31 Janu		uary 2021)

Expenses	Costs (\$)	Details			
Relocation costs associated with training requirements					
Accommodation costs					
Attendance at training courses, meetings & conferences (within Australia only)					
Trainee-incurred costs for internet access/IT Upgrades					
Research projects (e.g. access to online library, laboratory equipment)					
Resources (e.g. books, computers)					
Travel and accommodation expenses associated with training requirements					
Videoconferences facilities					
Total Cost					
Comments (if required)					

Declaration:

- I understand that the funded setting is required to retain documentary evidence of all items claimed via this funding and be able to provide these records upon request or for future audit purposes.
- I verify that the information contained in this Form is complete and correct at time of submission.

Report Prepared by:	Signature:	
Position:	Date:	
Email:	Telephone:	

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