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| <p><i>Please return to: PZ at the institute</i> <i>or</i> Personnel Department NWO-I PO Box 3021 3502 GA UTRECHT The Netherlands</p> | <p>For further information, employees of institutes please contact your personnel officer. Other employees can contact: Ms. A. Bor, email: a.bor@nwo.nl; tel.: +31 30 600 12 37 or Ms. M.L.F.G. Teuwissen, email: m.teuwissen@nwo.nl, tel.: + 31 30 600 12 61.</p> |  |
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Submit the claim always via the team leader or the personnel officer.

CLAIM FORM FOR SUBSIDY TOWARDS MOVING, ACCOMMODATION AND WEEKEND TRAVEL EXPENSES

Surname and initials :

Date of birth :

Email address :

Date of confirmation letter NWO-I :

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| MOVING EXPENSES FROM ABROAD | You can fill more comments on the back of this form. |
| Travel expenses € | |
| Transportation expenses € | |
| Total € | _____ |

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| MOVING EXPENSES WITHIN THE NETHERLANDS | You can fill more comments on the back of this form. |
| Transportation expenses: € | |

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| ACCOMMODATION EXPENSES (Attention! Only applicable if there is a dual household!) | You can fill more comments on the back of this form. |
| Monthly amount to be paid € | |

PLEASE NOTE THAT FROM ALL EXPENSES, PROOF OF PAYMENT IS REQUIRED. WITHOUT THESE PROOFS, WE CANNOT HANDLE YOUR CLAIM.

Date: Town/City:

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 (Signature of applicant)

The team leader/personnel officer declares to agree with this claim

Date: Town/City:

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 (Signature of working group leader/personnel officer)

Verwerking P-Beheer/NWO-I-bureau:

Kostensoort/reg.nr. :
Indienstdatum :
Uitdienstdatum :
Ingangsdatum vergoeding :

Weekendreiskosten

Vergoeding : €
Pensionkosten : €

Opmerkingen:

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Controle P-Beheer :
Verwerking SA d.d. :
Controle SA d.d. :

More comments:

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