**EXTERNAL EXAMINER**

**BANK DETAILS**

|  |
| --- |
| **Personal Details** |
|  |
| **Surname:** |  | **Title:** |  |
|  |
| **First Name(s):** |  |
|  |
| **National Insurance Number:** |  | **Date of Birth:** |  |
|  |
| **Home Address:** |  |
|  |
| **Email Address:** |  | **Telephone Number:** |  |
|  |
| **Nationality:** |  | **Male/Female: *(required for HMRC)*** |  |
|  |
| **School:** |  |
|  |
| **Bank Details** |
|  |
| **Bank/Building Society Name:** |  |
|  |
| **Branch/Address:** |  |
|  |
| **Payee Name on account:** |  |
|  |
| **Sort Code:***(6 digits)* |  | **Account Number:***(8 digits)* |  |
|  |
| **Building Society Roll Number:** *(if applicable)* |  |
|  |
|  |
| **Authorisation** |
| ***I hereby authorise payment of my External Examiner Fees/Expenses to the Bank/Building Society detailed above:*** |
| **Signature:** |  | **Date:** |  |
| ***Please return to the Quality Management Office:*** ***externalexaminers@salford.ac.uk*** |