University of Cape Town:	
Department of Electrical Engineering	

IR:	RATE:	TOTAL:

TUTOR MONTHLY CLAIM FORM

Student	No.					Date of Birtl	1		Email			
First Na	me(s)					Surname			Cell No			
	. ,	degree you are	currently registered for an	d i.r.o. UG st	udies spe		study.					
PhD		MSc		UG			Year					
Dates fo	r which th	is claim applies	s (it must be within one mo	nth e.a. 25/4/	20 – 24/5/2	20)			_			
nould si	gn the for	rm . You canno	t exceed a maximum of	10 hours pe	er week.	You may only	tutor a m	nax of 2 c	courses, use one form for both clai ourses. In total it should not exceed 40	hrs/month	You	
			n that you worked. No cl only the TA will submit you					hs . Liaise	directly with your TA. Your claim shou	ld be hande	ed to	
Course	Code						Course	Code				
Day egThurs	Date eg 25/02		Description of Task Marking, Tut, Prac etc	Time From eg 10:00	Time To eg 12:00	Duration eg 2 hours	Day egThurs	Date eg 25/02	Description of Task eg. Marking, Tut, Prac etc	Time From eg 10:00	Time To eg 12:00	Duration eg 2 hou
		TOTAL HOURS	CLAIMED FOR THE MONTH						TOTALHOURS CLAIMED FOR THE MONTH			

Verification	by LECTURER Responsible for Course (compulsory)	Verification by TEACHING ASSISTANT			
Print Name		Print Name			
Sign		Sign			
Date:		Date:			

Verification by LECTURER Responsible for Course (compulsory)	Verification by TEACHING ASSISTANT			
Print Name	Print Name			
Sign	Sign			
Date:	Date:			