

THE INSTITUTE OF FINANCE MANAGEMENT

CLAIM FOR EXTRA HOURS TEACHING WORKLOAD

(FULL/PART TIME ACADEMIC STAFF)

(FOR HUMAN RESOURCES OFFICE)

No Records Found

No claim records found for the selected month and Facilitator.

No Records Found For Summary

No Records Found For Summary

CERTIFICATION

- i. I HAVE SUBMITTED THE SUPPORTING DOCUMENTS TO THE HEAD OF
DEPARTMENT
- ii. I CERTIFY THAT THE PARTICULARS GIVEN ABOVE ARE CORRECT, AND I WISH
TO CLAIM THE TEACHING ALLOWANCE FOR THE PERIOD OF (MONTH AND
YEAR)

SIGNATURE: _____ DATE: _____

FOR OFFICIAL USE ONLY

CLAIM APPROVED/NOT APPROVED FOR PAYMENT BY HEAD OF DEPARTMENT

NAME: _____ SIGNATURE: _____

_____ DATE: _____