



Policy for

**Members, Trustees and Local
Governors Expenses**

Members', Directors' and Local Governors' Expenses Policy

Introduction

The Aspire Educational Trust understands that the contributions of time and commitments of its Members, Directors and Local Governors are important to the continued success of the AET. However we do not expect Directors and Local Governors to be out of pocket as a result of carrying out trust business.

Scope

This policy applies to all Members, Directors and Local Governors of the AET. Policies relating to staff expenses are covered by the Financial Regulations of the MAT.

Remuneration

Members, Directors and Local Governors cannot be remunerated for time spent on MAT business. They are, however, entitled to be reimbursed for out of pocket expenses incurred.

Expenses

A sample of the expense claims will be reviewed by the auditors. These will include all of the Directors and a sample of Local Governors from each LGB.

Claims may only be made for expenses which are wholly, exclusively and necessarily incurred for the purposes of the trust.

Where ever possible school resources should be used and where this is not possible prior approval should be obtained from the CEO.

The following types of claims may be considered:

Travel

- i. Car mileage /motor cycle millage at the current HMRC approved rate per mile (this includes car sharing).
- ii. All other transport must be booked through the trust.

Meals

- iii. Reasonable meal costs when away from home on trust business up to a maximum of £20 per director / Local Governors per day.

Child Care

- iv. Childcare when attending meetings on behalf of the MAT at cost.

Other expenses

- v. Other incidentals at cost, which might include telephone, stationery, printing costs, etc.

All expenditure needs to be reasonable and backed up by supporting documentation in the form of VAT receipts itemising each expense incurred.

Claims should be made by the end of the term during which the expense is incurred and the details, together with receipts and supporting information, recorded on a MAT expense claim form (see Appendix 1).

In calculating the mileage Members, Directors and Local Governors should use the shortest route as per Google maps and include the postcode of departure and destination on their mileage claim form.

Members, Directors and Local Governors must have their expenses approved by the CEO who has the discretion to query such expenses in line with the Academies Financial Handbook.

Exceptional Circumstance

The CEO will consider claims submitted late and will consult with two other directors before making a decision.



Member, Director & Governor Expenses

| | |
|------------------------------------|--|
| Name: | |
| Occasional Car User (please tick): | |
| Enter Vehicle registration: | |
| Claim for the month of.. | |
| Cumulative mileage: | |
| Claimed previously: | |
| Claimed this month: | |
| Total to date: | |
| Other expenses – see policy: | |

The information given may be used for fraud prevention purposes:
 I declare that my motor vehicle is taxed and has a current MOT (if applicable)
 I certify that:

1. The mileage allowance claimed relates to authorised business travel only and that the amount claimed is in accordance with approved rates.
2. All other items claimed involve expenditure actually and necessarily incurred in the performance of my duty, as per policy.
3. The expenses incurred and the journeys shown were authorised and that to the best of my knowledge and belief the claim made is correct

Signed: _____ Date: _____
 (Claimant)

LGB member claim form to be signed by the Principal of the school

| | | | |
|----------------------|---|--------|--|
| Authorising Officers | I certify that the expenses incurred and the journeys incurred and the journeys shown were authorised and that to the best of my knowledge and belief the claim made is correct | | |
| Signed: | | Date | |
| Designation: | | Tel No | |

Director/ Member claim form to be signed by the CFOO or CEO

| | | | |
|----------------------|---|--------|--|
| Authorising Officers | I certify that the expenses incurred and the journeys incurred and the journeys shown were authorised and that to the best of my knowledge and belief the claim made is correct | | |
| Signed: | | Date | |
| Designation: | | Tel No | |

Office use only

| Claim | Amount payable | Company | Account code | Centre code |
|-------|----------------|---------|--------------|-------------|
| | | | | |
| | | | | |
| | | | | |

Mileage claims:

| Date: | Starting point of the journey | Places visited | Finishing point of the journey | Paid mileage | Parking |
|-------|-------------------------------|----------------|--------------------------------|--------------|---------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Other expenses:

| Date: | Claim: | Reason for the claim: | Evidence: |
|-------|--------|-----------------------|-----------|
| | | | |
| | | | |
| | | | |
| | | | |