



# Application for an Educational reimbursement

Applicant's name: \_\_\_\_\_

Kennitala (ID nr.): \_\_\_\_\_ Place of work: \_\_\_\_\_

E-mail: \_\_\_\_\_ Tel.: \_\_\_\_\_

Address: \_\_\_\_\_ Postcode/City: \_\_\_\_\_

Reimbursements are deposited into a bank account. Please make sure to write the correct bank, ledger and account number.

Bank-Ledger-Account:

\_\_\_\_\_

An electronic payment slip will be sent to your online bank.

**An application will not be processed unless the necessary documents are provided**

Payments are made on the last working day of each month for applications submitted before or on the 20<sup>th</sup> of the same month.

The following documents accompany this application:

- A valid dated invoice stating the buyer's ID number, the seller's ID number, product or service paid for and the paid amount.
- If a course/conference was attended abroad, the provided documents must be in English. Course's fee, trips and accommodation needs to be categorized if applicable. If a translation is not provided, the reimbursement will not be paid.

The bill may not be older than 12 months.

By filling out this form, the applicant authorizes the union to process their personal data, i.e. review of the application and the supporting documents, reference to the union membership register, registration of the application, its outcome and the paid amount and if applicable discussion about the application in the educational fund.

\_\_\_\_\_  
Date and applicant's signature

Processing by the educational fund

Approved amount of the cost: isk: \_\_\_\_\_  
\_\_\_\_\_ %

No. of fund: \_\_\_\_\_

Account code: \_\_\_\_\_

Granted reimbursement: \_\_\_\_\_

Date of bill: \_\_\_\_\_

Proportion: \_\_\_\_\_

Previous paid reimbursement this year: \_\_\_\_\_

Granted reimbursement: \_\_\_\_\_

Comments: \_\_\_\_\_