

Grant payments

This form must be completed and signed, and sent to the Personnel Services
Unit for payment

_								
Erasmus + grant	Erasmus + grant Other:		Name of other grant:					
□ NORDFO grant								
Entered into between								
Surname	First name				National insurance no. (11 digits)			
Private address	Post code			Town/city				
Bank account no.	Telephone no.	. E-mai	l address					
and								
The organisation's name and ad- UNIVERSITY OF SOUTHEAS (USN) PO BOX 235 3603 KONGSBERG NORWAY		Faculty/department Department/section						
Regarding the following:								
Grant:								
Agreed sum:		Grant duration (from date – to date)						
Other information Travel destination, if applicable: Name of university you will visit, if applicable:								
For completion upon payment								
Salary type Numb	per Rate		Amount	Accour	Budget unit	Work Package (7+2 digits)	Objective	
 If all or part of the work shall be undertaken abroad, details of this must be provided. For international payments, the separate form for overseas payments must be used. A copy of the recipient's passport must be attached if the recipient does not have a Norwegian national insurance number / D-number. Grant recipients should be aware that grant payments may be checked by the Norwegian Tax Administration with regard to any excess, and should therefore retain all receipts from the relevant tax year. You must keep a record of your expenses. For 								
grants of over NOK 50,000, this record must be submitted to USN.								
 As a grant recipient, you are responsible for notifying USN (<u>personalservice@usn.no</u>) in the event of any excess received. All grant recipients should read the relevant grant guidelines. 								
Any comments								
Date Grant recipient's signature								
Date	Certification							
Date	Budget allocating authority							