

Agency Name Management Body (if applic.)				PAYMENT SCHEDULE				
				\$21.20 (excl. GST) per day for a single Mentor/Supervisor				
A dalace a			\$12.45	\$12.45 (excl. GST) per day each for two Mentors per PST				
Address		P'code			58.30 (excl. GST) per day each for three Mentors per PST			
Administrator Phone #	Pay Claim	Pay Claim Ref Code *			(excl. GST) per PST, per day for the Director/Coordinator			
Mentor Name	PST (Student) Name	Method / Level / Age	Placement From	n Placement To	# Days Claiming	Rate	Amount :	
Agency's Coordinator Name						\$1.30		
AGENCY AUTHORISATION						Total		
I certify that the information provide * Pay Claim Ref Code is your unique id			r Ref Code will appear	on our Payment Advice to	o you and appea	r in the Invoice	Number field.	
SECTION B: SCHOOL OF	EDUCATION TO COMPLI	ETE						
I certify as Financial Delegate this	claim is authorised for payment ag	gainst Vendor ID						
CECTION C. FINANCE TO	COMPLETE							
SECTION C: FINANCE TO								