

## ANNUAL SEASON TICKET LOAN REQUEST

***This form must reach the Payroll office by the 10<sup>th</sup> of the month to ensure payment is made on the 27<sup>th</sup>. If the form is received after this date the loan will be paid with your following months' salary.***

***Send this form by post to the payroll office, Room 0.21b, Ground Floor, Hunter Wing or by email to:  
[payroll@sgul.ac.uk](mailto:payroll@sgul.ac.uk)***

Employee Information	
Full Name:	
Employee Number:	
Department:	
Contact Number:	

Current Season Ticket Expiry Date:
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Application for an Advance to purchase an Annual Season Ticket			
Advance requested for the sum of:	£	Amount in figures	
Payday Advance Required: i.e 27 <sup>th</sup> (Please Indicate Month)			
Travelling Between:		AND	

### Employee Declaration

I hereby apply for a loan from St George's University of London as above to enable me to purchase an annual season ticket. I have read and agree to the attached conditions of the loan and to the recovery from my net monthly salary by 11 equal instalments. This will normally commence in the month after the advance is granted. In the event that I leave employment for whatever reason before the advance has been fully repaid, I agree that the balance due to St George's University may be recovered from my final salary. If necessary I will make up any amount due through any other benefits due to me or my estate.

***I certify that the advance will only be used to purchase an annual season ticket and I will supply a copy of the ticket or receipt to the payroll office within 5 days of purchase.\****  
(Please attach copy receipt or ticket to a RECEIPT OF SEASON TICKET FORM)

Employee Signature:		Print Name:	
Job Title:		Date:	

\* Failure to supply a copy of receipt or ticket will result in the loan being deducted in full from your next salary payment.

In order for the loan to qualify as interest free under HMRC regulations, the maximum loan St George's University of London can advance is £10,000.

PAYROLL USE ONLY	
Payroll Deduction Start:	Payroll Deduction End:
Monthly Amount:	
Personal Details Checked By:	Date: