

## Employee Referral Scheme | Claim Form

Please **fully complete** this form to claim your payment(s) through the Isle of Man Public Service's Employee Referral Scheme.

Section 1 should be completed by the referrer and then passed to the line manager of the new starter to complete Section 2 and submit to Payroll.

**Section 1:** For completion by the referrer requesting payment

<b>Referrer name</b>			
<b>Referrer Employee Number</b>			
<b>Name of appointed employee</b>			
<b>Declaration</b> By signing below I confirm I must remain employed/engaged by the Isle of Man Public Service to receive referral payments. I also understand and accept that I cannot make more than five referrals in any two year period.			
<b>Signature</b>		<b>Date</b>	__ / __ / ____

**Section 2:** For completion by authorising manager (of the referred candidate)

<b>Name of manager</b>			
<b>Department</b>			
<b>Manager job title</b>			
<b>New starter's job title</b>			
<b>Referral amount authorised</b>	£	<b>Amount to be paid now</b>	£
<b>First/second payment?</b>	First / Second		
<b>Cost centre code</b>		<b>Item code</b>	
<b>Declaration</b> By signing below I confirm: <ul style="list-style-type: none"> <li>• A referral scheme was authorised for this position</li> <li>• I have validated this claim by checking against the new starter's application form</li> <li>• The new starter is still employed <b>and</b> was not employed/engaged with Isle of Man Public Service before this post (including casual/agency/student posts)</li> <li>• The referrer was not involved in the recruitment process</li> </ul>			
<b>Signature</b>		<b>Date</b>	__ / __ / ____

Once authorised and completed please send this form to [payroll@gov.im](mailto:payroll@gov.im) to process the payment.

**For more information on the terms and conditions of the Employee Referral Scheme please see the Office of Human Resources website ([www.gov.im/hr](http://www.gov.im/hr)).**