



Annual Stipend Review

This annual review of stipend and financial benefits shall be undertaken by the churchwardens and the treasurer in consultation with the priest / deacon and archdeacon (mindful of any local standards that may be established) each year. The completed form shall be forwarded to the archdeacon on the anniversary of appointment and no later than 31 October: it is then submitted for approval by the Diocesan Secretary (on behalf of the Bishop).

01

Applicant's details

Name of Priest / Deacon
Chaplaincy / Congregation
Archdeaconry
Title of Appointment

02

Stipend - all sections must be completed

The annual stipend in local currency will be
with effect from (DD/MM/YYYY)

Have any allowances been included in the stipend?

Yes

No

If **Yes** please give full details below

Allowances amount

Annual stipend (sterling equivalent)*

*Exchange rate used

This stipend will be paid Weekly Monthly Quarterly

This stipend will be paid in Local currency Sterling

Other financial benefits

Tax

Tax on stipend and other financial benefits will be paid locally

Yes

No

If **No**, please provide explanation below.

Important: It is the responsibility of the priest to ensure that personal tax liability is understood and met wherever it is due.

Accommodation	<div>Have there been any changes to the accommodation over the last year?</div> <div>YesNo</div> <div>If Yes, please provide details below.</div>
Expenses	<div>Have there been any changes to expenses allowed over the last year?</div> <div>YesNo</div> <div>If Yes, please provide details below.</div>
Medical cover	<div>Registered in National Health Scheme of country of residence?</div> <div>YesNo</div> <div>Registered in Private Health Care Scheme?</div> <div>YesNo</div> <div>If Yes, what is the name of the scheme?</div> <div>Repatriation Insurance?</div> <div>YesNo</div> <div>If Yes, what is the name of the scheme?</div>

03

Signatures	Priest / Deacon signature	Print name
		Date (DD/MM/YYYY)
	Churchwarden (for the Chaplaincy Council) signature	Print name
		Date (DD/MM/YYYY)
	Churchwarden (for the Chaplaincy Council) signature	Print name
		Date (DD/MM/YYYY)
	Archdeacon Signature	Print name
		Date (DD/MM/YYYY)