

Employees Claim for loss of earnings during jury service

Only use this form if you're an employee and your employer is not paying you during jury service.

We can reimburse you up to £64.95 per day for loss of earnings during the first 10 days of jury service. For longer trials, check the rates on the allowances sheet or at www.gov.uk/jury-service.

When this form is completed, bring it with you on your first day of jury service

Yo	our details
Yo	our full name
Yo	our juror number
Yo	our employer's company name
Yo	our job title
Er	nployer's address Building and street
Se	econd line of address

Town or	city							
County (optional)							
Daataad	_							
Postcode	.							
You	r employer must	complete this se	ction					
Enter your sta	aff member's net	daily earnings						
period. Net da	earnings for each ily earnings means ational Insurance a	the amount they	take home after					
	Week 1	Week 2	For weekends or bank					
Monday			holidays, the court is closed and we cannot					
Tuesday			reimburse your					
Wednesday			employee for these days.					
Thursday			uays.					
Friday								
If your employ to work?	ee is not required t	o attend court will	they be able to return					
For a full day	For a full day Yes No							
For a half day								
Before the end	Before the end of the 2 weeks Yes No							
Employer dec	claration							

I confirm that the information I've given is correct. I also understand that I may be prosecuted if I've given false or misleading information.

Signature			Find guidance for employers on GOV.UK www.gov.uk/giving-staff-time-off-jury-service
Print your name			
Date			_
Day	Month	Year	
Your job title			
Phone number			We may contact you to
Email address			check details about your employee's earnings