# Orphan's/Unsupported Child's Benefit application form

Work and Income
Te Hiranga Tangata
*A service of the Ministry of Social Development*

If you need more information go to our website **www.workandincome.govt.nz** or call us on **0800 559 009**.

We suggest that you read the instructions on pages 1 to 4 of this application form before starting to fill it out, so you get a feel for what is needed.

## Support we can give you

If you are raising someone else's child, we may be able to help in a small way by meeting some of the costs involved.

The **Orphan's Benefit** is for people looking after someone else's child because their parents have died or can't be found, or when they can't look after their child because the parent has a long-term illness.

The **Unsupported Child's Benefit** is for people looking after someone else's child because the child's parents can't support them due to a family breakdown.

**The child you are looking after must be:**

- aged under 18 years and
- single and
- financially dependent on you.

**You must:**

- be aged 18 years or older, and the main caregiver of the child and
- expect to care for the child for 12 months or more and
- not be the child's natural or adoptive parent or the step-parent if you are applying for the Unsupported Child's Benefit.

Both you and the child must also normally live in New Zealand.

**You must give us all the information we need.**

If you do not have all the information we need, talk with us and we may be able to help.

**If we find out later that any information you give us is not true, or that you knew information you should have told us and did not tell us, we may stop paying your benefit. You might need to pay money back, we may impose a penalty, and you could be prosecuted.**

## What you will find in this application form

This application form is made up of:

- an applicant form – this is for you to fill out (pages 5 to 10)
- a form to fill in if the child is an orphan (pages 11 to 14)
- a form to fill in for an unsupported child (pages 15 to 19)
- Obligations - this lists the obligations you agree to in return for getting payments and what will happen if you do not meet these (page 20)
- Privacy Statement – this is what we do with the information you give us (page 21)
- a signature page – where you agree to meet your conditions for receiving this benefit (pages 22 and 23)
- Helper's statement – to be completed if someone has filled in the application form on behalf of you or your partner if you have one (page 22).

## How to fill in this application form

**Tick** the small square boxes. For example, if your answer to a question is 'Yes', tick the box next to the word 'Yes'.

☐ No ☑ Yes

**Write** in the longer boxes. If you do not have enough room to write the answer to a question, use another piece of paper and attach it to the form.

**Often this form tells you what to do next**

If you see

**Text that tells you what to do next**

we want you to answer in the following spaces.

If you see

**Go to question #**

go to the question number given.

**If we do not give you a question number to go to, answer the next question.**

**We use the following to show when we need documents and to help you answer questions**

Documents you need to bring.

Information about a question.

How to answer a question.

If you have someone fill in this application form for you, that person must fill in and sign the Helper's statement on page 22.

The better the information you give us, the sooner we can process your application. So, please fill out the application form carefully, and bring all the documents you need to your meeting.

# Orphan's/Unsupported Child's Benefit
## what to bring

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Once you have filled out the application form, use this checklist to tick off all the documents you need for your meeting with us.

Talk to us if you do not have any of the documents, have given them to us recently or if there might be a delay in getting them.

## What you need to bring

**INFORMATION NOTE:**
Documents need to be originals, or copies of documents that have been certified as a **true copy** by a Solicitor/Lawyer, Notary Public, Registrar of the Court or Justice of the Peace.

**Proof of who you are:**

- ☐ **If you were born in New Zealand,** bring one type of official identification that has your full legal name and your date of birth (for example, your birth certificate, passport, driver licence, firearms licence, deed poll).
- ☐ **If you were born overseas,** bring proof that you have a right to live in New Zealand (for example, a citizenship certificate, a New Zealand passport, a passport from another country with residence class visa or proof of permanent residence).
- ☐ **If your name has changed,** bring your marriage certificate, deed poll, or other proof of the name change.
- ☐ **All people applying** need to bring **two** more documents that help to prove who you are (for example, a marriage certificate, bank statement, phone or power account, driver licence).
- ☐ A form or letter from Inland Revenue showing your tax number.
- ☐ Proof of your bank account details, such as a bank statement or deposit slip.

One of the documents you bring must be at least two years old.

## What you need to bring for the child

**Proof of who the child is:**

Full birth certificate for the child that you are raising ☐

Proof of any income for the child - this may be income that both you or the child receives ☐

**For Orphan's Benefit you also need to bring:**

Death certificate(s) for the parents and any estate details ☐

**For Unsupported Child's Benefit you also need to bring:**

Copies of Family Group Conference outcomes or Court Orders or Court approved plans ☐

# Orphan's/Unsupported Child's Benefit application form

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## Tell us about yourself

If you have received a benefit or extra financial help from us before, write your client number here if you know it. This number can be found on your Community Services Card if you have one.

**Client number** ☐☐☐ ☐☐☐ ☐☐☐

### Tell us the names you have been known by

**ATTACHMENT FOR Q1:**
Bring proof of your identity. What you need to bring is explained on page 3.

**1 What is your full name?**

☐ Mr ☐ Mrs ☐ Ms ☐ Miss Other ☐

First and middle names

Surname or family name

**2 Is the name on your birth certificate the same as above?**

☐ No → **Tell us the name that is on your birth certificate** ☐ Yes

First and middle names

Surname or family name

**HOW TO ANSWER Q3:**
For example, have you had married names, English names, changes by deed poll, or aliases?

**ATTACHMENT FOR Q3:**
Bring your marriage certificate, deed poll, or other proof of any name change.

**3 Have you ever been known by any other name?**

☐ No ☐ Yes → **Write them all out below**

1.
2.

**4 What name would you like us to call you?**

☐ The name I wrote in Question 1 ☐ The name I wrote in Question 2
☐ Other → **Write the full name below**

### Tell us more about you

**5 What date were you born?**

Day Month Year

**ATTACHMENT FOR Q7:**
Bring a form or letter from Inland Revenue showing your tax number.

**ATTACHMENT FOR Q8:**
You will need to provide proof of your bank account details, such as a bank statement or deposit slip.

## 6 Are you:

☐ Male ☐ Female

## 7 What is your Inland Revenue tax number?

☐☐☐☐☐☐☐☐☐

## 8 What bank account would you want your payments to be paid into?

The account is in the name of:

The account number is:

Bank Branch Account number Suffix

# Tell us how we can contact you

**HOW TO ANSWER Q9:**
If you live in a rural area, flat/house number could include your RAPID number, fire number, emergency services number.

**HOW TO ANSWER Q10:**
Mailing address can include a postal box (PO Box), rural delivery details, or C/O address.

**HOW TO ANSWER Q11:**
Please only give us contact details you would like us to use.

## 9 Where do you live?

Flat/House number Street name

Suburb

Town/City

## 10 Is your mailing address different from where you live?

☐ No ☐ Yes **Tell us your mailing address**

## 11 How else can we contact you?

Tick the best way for us to contact you

| | | |
|---|---|---|
| Home phone | ( ) | |
| Mobile phone | ( ) | |
| Other mobile phone | ( ) | |
| Fax | ( ) | |

## 12 Do you agree to get emails from us?

☐ No ☐ Yes **Tell us your email address** ☐ I don't have an email address

## Tell us your ethnicity

**INFORMATION FOR Q13:**
We collect this information for statistics that we use in research and future development work.

**13** **Tick the group(s) you most identify with.**

- ☐ Māori → **Which tribe(s) or iwi?**
- ☐ New Zealand European
- ☐ Niuean
- ☐ Samoan
- ☐ Indian
- ☐ Other European
- ☐ Tokelauan
- ☐ Tongan
- ☐ Chinese
- ☐ Cook Island Māori
- ☐ Other → **Please write below**
- ☐ Do not want to answer

## Tell us about your residence status

**HOW TO ANSWER Q14:**
This means that you consider New Zealand your home, you are a legal resident, you usually live here and you intend to stay.

**14** **Do you usually live in New Zealand?**

☐ No ☐ Yes

**15** **What best describes your residence status in New Zealand?** Tick only one box.

- ☐ New Zealand citizen by birth → **Go to question 18**
- ☐ Granted New Zealand citizenship — Date citizenship granted: Day Month Year → **Go to question 16**
- ☐ Granted permanent residency — Date permanent residence granted: Day Month Year → **Go to question 16**
- ☐ Other → **What is your residence status?**

**16** **When did you arrive in New Zealand?**

Day Month Year

**17** **What country were you born in?**

# Tell us about the child

## Tell us the names the child has been known by

**ATTACHMENT FOR Q18:**
Bring proof of the child's identity. What you need to bring is explained on page 4.

**18** **What is the child's name?**

First and middle names

Surname or family name

**19** **Is the name on the child's birth certificate the same as above?**

☐ No → **Tell us the name that is on the child's birth certificate**

☐ Yes

First and middle names

Surname or family name

**HOW TO ANSWER Q20:**
For example, has the child had a different surname or family name, English names, changes by deed poll, or aliases?

**20** **Has the child ever been known by any other name?**

☐ No ☐ Yes → **Write them all out below**

1.

2.

**21** **What date was the child born?**

Day Month Year

## Tell us about the child's residence status

**22** **Was the child born in New Zealand?**

☐ No

☐ Yes → **Go to question 27**

**23** **When did the child arrive in New Zealand?**

Day Month Year

**24** **What country was the child born in?**

**25** **Where was the child's birth registered?**

26 **How long will the child stay in New Zealand?**

## Tell us about the caring arrangements for the child

27 **Is the child living with you at your address?**

☐ No ↓ Give reasons why not below

☐ Yes

28 **When did the child come into your care?**

Day Month Year

29 **How long will the child be in your care?**

30 **Why did the child come into your care?**

31 **What is your relationship to the child?**

☐ Natural parent ☐ Adoptive parent ☐ Step-parent

☐ Not related ☐ Other relative ↓ Please explain below

## Tell us about income for the child

**HOW TO ANSWER Q32:**
Examples of income on behalf of the child are:
- money from the child's parents
- ACC
- Child, Youth and Family
- other organisations.

**ATTACHMENT FOR Q32:**
Please provide proof of payments.

**32** **Do you get any income on behalf of the child?**

☐ No

☐ Yes **Please provide details below**

| Where/who does it come from? | How much? | How often (weekly, fortnightly, etc) |
|---|---|---|
| | $ | |
| | $ | |
| | $ | |
| | $ | |
| | $ | |
| | $ | |

**33** **Does the child get any income apart from what they earn themselves?**

☐ No

☐ Yes **Please provide details below**

| Where/who does it come from? | How much? | How often (weekly, fortnightly, etc) |
|---|---|---|
| | $ | |
| | $ | |
| | $ | |
| | $ | |
| | $ | |
| | $ | |

## Establishment grant

This is a one-off contribution to help with the costs when a child first comes into your care, such as a bed, bedding and clothing. If you or your partner have received (or have been approved to receive) an upfront payment as part of the Home for Life support package you will not be eligible for this grant.

**INFORMATION NOTE FOR Q34:**
The Home for Life support package is available for approved Home for Life, parents.

**34** **Have you or your partner received an upfront payment from Child, Youth and Family as part of the Home for Life support package?**

☐ No ☐ Yes

**35** **What type of assistance are you applying for?**

☐ Orphan's Benefit **Go to question 36**

☐ Unsupported Child's Benefit **Go to question 58**

# Orphan's Benefit
extra information

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## Tell us about the child's parents

### Tell us about the mother

**36** **What is the name of the child's mother?**

First and middle names

Surname or family name

**HOW TO ANSWER Q37:** For example, has she had married names, English names, changes by deed poll, or aliases?

**37** **Is the mother known by or has she used any other names?**

☐ No ☐ Yes **Write them all out below**

1.
2.

**38** **What is the mother's date of birth?**

Day Month Year

**39** **Has the child's mother died?**

☐ No **Go to question 42**

☐ Yes

**40** **Where was the mother's death registered?**

**41** **What are the name and contact details of the person who administers the mother's estate?**

Flat/House number Street name

Suburb Town/City

| | |
|---|---|
| Home phone | ( ) |
| Mobile phone | ( ) |
| Email | |

**42** **Is the mother in hospital?**

☐ No ☐ Yes **Please provide details below**

Date of admission: Day Month Year

Hospital name:

**43** **What is the mother's last known address?**

Flat/House number Street name

Suburb

Town/City

**44** **When did someone last hear from the mother?**

Day Month Year

## Tell us about the father

**45** **What is the name of the child's father?**

First and middle names

Surname or family name

**HOW TO ANSWER Q46:** For example, has he had married names, English names, changes by deed poll, or aliases?

**46** **Is the father known by or has he used any other names?**

☐ No ☐ Yes **Write them all out below**

1.

2.

**47** **What is the father's date of birth?**

Day Month Year

**48** **Has the child's father died?**

☐ No **Go to question 51**

☐ Yes

**49** **Where was the father's death registered?**

**50** **What are the name and contact details of the person who administers the father's estate?**

Flat/House number | Street name

Suburb | Town/City

| | |
|---|---|
| Home phone | ( ) |
| Mobile phone | ( ) |
| Email | |

**51** **Is the father in hospital?**

☐ No ☐ Yes **Please provide details below**

Date of admission: Day Month Year

Hospital name:

**52** **What is the father's last known address?**

Flat/House number | Street name

Suburb

Town/City

**53** **When did someone last hear from the father?**

Day Month Year

## Tell us if the child has lived overseas

**54** **Has the child lived in any countries outside of New Zealand?**

☐ No **Go to question 55** ☐ Yes **Please list details below**

| Name of country | Date child entered this country | Date child left this country | Reason for being in this country |
|---|---|---|---|
| | / / | / / | |
| | / / | / / | |
| | / / | / / | |
| | / / | / / | |

**ATTACHMENT FOR Q55:**
You will need to show us evidence of these payments, such as a pension certificate.

**55** **Are you or any other person receiving a social security pension or pension of a similar nature for the child from the government of a country other than New Zealand?**

☐ No Go to Obligations and Privacy on page 20

☐ Yes **Tick the box that best describes the payments**

☐ Widow or survivor ☐ Child or dependent ☐ Disability or health condition

☐ Other

**56** **If you ticked 'Yes' for question 55, please give details of the payments.**

| | Payment 1 | Payment 2 |
|---|---|---|
| What country does the payment come from? | | |
| How much is received each time the payment is made (in overseas currency)? | | |
| Is this amount before or after tax? | | |
| How often is the payment received (for example: weekly, fortnightly, monthly)? | | |
| What is the name of the pension, allowance or benefit? | | |
| What is the payment reference number? | | |

**57** **Is this social security benefit or benefit of a similar nature paid to you?**

☐ No **Please provide details below for the person who receives the payments**

☐ Yes Go to Obligations and Privacy on page 20

First and middle names

Surname

Flat/House number

Street name

Suburb

Town/City

| | |
|---|---|
| Phone | ( ) |
| Mobile phone | ( ) |
| Email | |

# Unsupported Child's Benefit
extra information

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## Tell us about the child's parents

### Tell us about the child's custody arrangements

**58** **Are you fully supporting the child?**

☐ No → Please provide details of what help you get from the parents

☐ Yes

**59** **Who has legal custody of the child?**

**60** **What was the date of the custody order?**

Day | Month | Year

**61** **Have you had any contact with a social worker from Child, Youth and Family?**

☐ No

☐ Yes → Please give the name of the social worker and name of the Child, Youth and Family office

**ATTACHMENT FOR Q62:** If 'Yes' please bring any documentation you would have been given at this meeting.

**62** **Have you and the Child's family attended a Family Group Conference organised by Child, Youth and Family?**

☐ No ☐ Yes → Please tell us the date of the conference

Day | Month | Year

**HOW TO ANSWER Q63:** Examples of Child, Youth and Family support are board payments, counselling, etc.

**63** **Have you received any support from Child, Youth and Family for the child?**

☐ No → Go to question 65

☐ Yes → Please provide details below

| Reason for payment | How much | How often (such as weekly) |
|---|---|---|
| | $ | |
| | $ | |

**64** **Have payments from Child, Youth and Family stopped or are they about to stop?**

☐ No

☐ Yes → **When did or will they stop?**

| | | |
|---|---|---|
| | | |
| Day | Month | Year |

**65** **Were the child's immediate previous caregivers the child's parents/guardians?**

☐ No

☐ Yes → **Go to question 68**

**66** **What is the name of the child's previous caregiver?**

First and middle names

Surname or family name

**67** **Why is the child no longer living with the previous caregiver?**

**68** **Why are the child's parent's/guardians not able to provide fully for this child?**

**HOW TO ANSWER Q68:**
Give reasons: Has there been a breakdown? Comment on financial, accommodation, disability or other limitations.

**69** **Was the living arrangement ordered by any of the following?**

**ATTACHMENT FOR Q69:**
Please bring copies of the Court orders or documentation from Child, Youth and Family where applicable.

☐ No

☐ Yes → **Please tick which agency**

☐ Courts ☐ Child, Youth and Family ☐ Not applicable

☐ Other agency → **Please name agency below**

## Tell us about the mother

**70** **What is the name of the child's mother?**

First and middle names

Surname or family name

## 71 What is the mother's date of birth?

| | | |
|---|---|---|
| | | |
| Day | Month | Year |

## 72 Is the mother known by or has she used any other names?

HOW TO ANSWER Q72:
For example, has she had married names, English names, changes by deed poll, or aliases?

☐ No ☐ Yes → **Write them all out below**

1.

2.

# Mother's contact details

## 73 Do you know where the mother lives?

☐ No → **If you can, please give the last known address below**

☐ Yes → **Please provide details**

Flat/House number | Street name

Suburb | Town/City

| | |
|---|---|
| Home phone | ( ) |
| Mobile phone | ( ) |
| Email | |

## 74 Do you know where the mother works?

☐ No → **If you can please give the details below for her last employer**

☐ Yes → **Please give details of her employer (If the parent is self-employed, give the name, address and telephone number of their business below)**

Business name

Number | Street name

Suburb | Town/City

| | |
|---|---|
| Work phone | ( ) |
| Mobile phone | ( ) |
| Email | |

**HOW TO ANSWER Q75:**
Examples of further details are:
names and addresses of parents, brothers, sisters or friends
details of insurance, bank accounts or shares
names and addresses of accountants or solicitors.

**INFORMATION NOTE FOR Q76**
If the mother gets in touch with you, please pass on any additional information to us.

**75** Can you give any other details to help find the mother?

☐ No ☐ Yes → Please give details below

**76** Does the mother ever get in touch with you or the child?

☐ No ☐ Yes → Please tell us about the contact and how often it occurs below

## Tell us about the father

**77** What is the name of the child's father?

First and middle names

Surname or family name

**78** What is the father's date of birth?

Day Month Year

**HOW TO ANSWER Q79:**
For example, has he had married names, English names, changes by deed poll, or aliases?

**79** Is the father known by or has he used any other names?

☐ No ☐ Yes → Write them all out below

1.
2.

## Father's contact details

**80** Do you know where the father lives?

☐ No → If you can, please give the last known address below

☐ Yes → Please provide details

Flat/House number Street name

Suburb Town/City

| | |
|---|---|
| Home phone | ( ) |
| Mobile phone | ( ) |
| Email | |

## 81 Do you know where the father works?

☐ No → **If you can please give the details below for his last employer**

☐ Yes → **Please give details of his employer (If the parent is self-employed, give the name, address and telephone number of their business below)**

Business name

Number | Street name

Suburb | Town/City

| | |
|---|---|
| Work phone | ( ) |
| Mobile phone | ( ) |
| Email | |

**HOW TO ANSWER Q82:**
Examples of further details are:
names and addresses of parents, brothers, sisters or friends
details of insurance, bank accounts or shares
names and addresses of accountants or solicitors.

## 82 Can you give any other details to help find the father?

☐ No ☐ Yes → **Please give details below**

## 83 Does the father ever get in touch with you or the child?

**INFORMATION NOTE FOR Q83**
If the father gets in touch with you, please pass on any additional information to us.

☐ No ☐ Yes → **Please tell us about the contact and how often it occurs below**

# Tell us if you get child support

## 84 Does either parent pay child support?

☐ No

☐ Yes → **Please give details of the payments**

| Who pays? | What do they pay for? | How much? | How often (such as weekly, fortnightly) |
|---|---|---|---|
| | | $ | |
| | | $ | |
| | | $ | |
| | | $ | |
| | | $ | |
| | | $ | |

# Orphan's / Unsupported Child's Benefit
obligations and privacy

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## You need to read and complete this section.

This part of the application form:

- lists the applicant's obligations
- explains what will happen if obligations are not met
- explains how we protect the information given to us, and what we can do with it
- includes a signature page for you to sign.

## Obligations

These are what you have to do to receive payments from Work and Income. Please read all the obligations because they could apply to you if your circumstances change.

### Change of circumstances

**I must tell Work and Income or my Contracted Service Provider (where I have one assigned to me) immediately if :**

- the care and/or support arrangements for the child change
- the financial circumstances of the child change
- either the child or I intend to travel overseas
- I have changes to personal details (such as name, address or bank account number)
- either the child or I have any other change that may affect my benefit entitlement or rate.

### Not telling us about changes in your circumstances

**I understand that if I do not tell Work and Income about changes that might affect whether I can get Orphan's/Unsupported Child's Benefit or the amount I'm paid, that:**

- my benefit may be reviewed and cancelled, and
- I may have to pay back the total amount of any overpayment that I have received, and
- Work and Income may impose a penalty (up to three times the value of the overpayment), and
- I may be prosecuted and fined or imprisoned.

You have the right to review or dispute any decision to reduce or stop your benefit.

# Privacy Statement

The legislation administered by the Ministry of Social Development allows us to check the information that you give us. This may happen when you apply for assistance and at any time after that. The Privacy Act 1993 requires us to tell you why we collect the information and what we will do with it.

## Why we collect information

The information you give us or your Contracted Service Provider (where you have one assigned to you) is collected under the authority of the legislation administered by the Ministry of Social Development. The information will be held by the Ministry of Social Development and/or your Contracted Service Provider.

The information is collected for the purposes of the legislation administered by the Ministry of Social Development (including Work and Income, Child, Youth and Family and other service lines of the Ministry), and in particular for:

- granting benefits and other assistance under the Social Security Act 1964
- providing employment related services
- statistical and research purposes
- providing advice to Government
- care and protection needs of children
- providing support and services for you and your family
- providing education related services.

Work and Income and your Contracted Service Provider will exchange information about you in order to provide you with your correct financial assistance and other services. Your Contracted Service Provider may collect information from other agencies where that information is relevant to the services that the Contracted Service Provider is providing you.

You are not required to give Work and Income or your Contracted Service Provider information, but if you do not give them, or us, all the information we ask for, your application for benefits and other assistance may be declined.

## We may contact health providers

Work and Income or your Contracted Service Provider may contact health providers to check any health related information you give us.

## We may compare the information you give us with other government-held information

The information you give us, or your Contracted Service Provider, may be compared with information held by other government agencies such as Inland Revenue, the Ministry of Justice, the Department of Corrections, the New Zealand Customs Service, the Department of Internal Affairs, the Accident Compensation Corporation, Housing New Zealand Corporation, Ministry of Health and Immigration New Zealand. It may also be compared with social security information (for example, pension or benefit information) held by other governments (including Australia and the Netherlands).

## We may share information with Inland Revenue

Under the Tax Administration Act 1994, if you have dependent children, the information you give us, or your Contracted Service Provider, may be shared with Inland Revenue for the purpose of administering Working for Families Tax Credits. Inland Revenue may also:

- use the information for the purposes of child support, student loans and taxation
- disclose it to the Ministry of Business, Innovation, and Employment, Statistics New Zealand, the Ministry of Justice, the Accident Compensation Corporation, and the Ministry of Education
- disclose your personal information to your partner.

## We may give information to service providers, employers and childcare providers

Work and Income or your Contracted Service Provider may:

- give employers information about you to find you employment and contact the employer to discuss the result of any job interview that you are referred to
- share information with childcare centres to administer your entitlement to childcare assistance
- give information about you to the Tertiary Education Commission, Workbridge, training providers, career services or other agencies that have a formal agreement to provide services on behalf of Work and Income.

## We may use your information to give you a better service

Other information that you give us or your Contracted Service Provider that is not required to assess your entitlement to a benefit (for example, on your skills, aspirations, family circumstances) may be used to provide a better service to you by your Contracted Service Provider or the Ministry of Social Development.

## You have the right to see and correct your information

Under the Privacy Act 1993 you have the right to ask to see all information we, or your Contracted Service Provider, hold about you and to ask them, or us, to correct that information.

# Signature page for Orphan's/Unsupported Child's Benefit

Office copy

**By ticking the boxes and signing this application form, you agree to meet your obligations and conditions of grant**

## Applicant

- ☐ I have completed all the questions or they have been completed for me in this Orphan's/Unsupported Child's Benefit Application.
- ☐ The information I have given is true and complete.
- ☐ The conditions for receiving this assistance have been explained to me and I understand these conditions.
- ☐ I have read (or had explained to me) and understood the Privacy Statement contained in this application form

Applicant's name (print) | Applicant's signature | Date (Day / Month / Year)

**If we find out later that any information you give us is not true, or that you knew information you should have told us and did not tell us, we may stop paying your benefit. You might need to pay money back, we may impose a penalty, and you could be prosecuted.**

**If someone has completed the application form for you please get them to complete the Helper's statement below.**

**Please use the "What to Bring" checklist (page 3) to help you make sure you bring all the documents you need to your meeting with us.**

## Helper's statement

Complete this if you have helped the applicant or their partner to complete this application form.

### What is your full name?

First and middle names | Surname or family name

### What are your contact details?

Address | Phone ( )

### Tick the box for the statement that applies

- ☐ I completed this application form at the request of the person applying for Orphan's/Unsupported Child's Benefit. They told me they understood what they were signing. The statements and answers I have completed are true and complete as given to me by the person applying.

Helper's signature | Date (Day / Month / Year)

# Signature page for Orphan's/Unsupported Child's Benefit
Applicant copy

**By ticking the boxes and signing this application form, you agree to meet your obligations.**

## Applicant

- ☐ I have completed all the questions or they have been completed for me in this Orphan's/Unsupported Child's Benefit Application.
- ☐ The information I have given is true and complete.
- ☐ I have read (or had explained to me) and understood the conditions for receiving this assistance have been explained to me and I understand these conditions.
- ☐ I have read (or had explained to me) and understood the Privacy Statement contained in this application form

| Applicant's name (print) | Applicant's signature | Date |
|---|---|---|
| | | Day Month Year |

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