

Away From Home Allowance Application



Work and Income
Te Hirainga Tangata

A service of the Ministry of Social Development

CLIENT NUMBER

--	--	--	--	--	--	--	--	--	--

Who can get this allowance

If you need help filling in this form, please ask at your nearest Work and Income service centre.

Mehemea e hiahia me awhina a koe ki te whakaki i tenei panui, haere patai ki te poari o te Work and Income tata tonu ki a koe.

Afai e te mana'omia se fesoasoani i le faatumuina o so'o se pepa talosaga e uiga i penefiti, faamolemole faafesoota'i le ofisa o le Work and Income.

Away From Home Allowance

- The Away From Home Allowance provides help to parents or caregivers of 16 and 17 year olds who have accommodation costs while living away from home to attend tertiary study or employment-related training.
- How much you will receive from the Away From Home Allowance depends on your child's accommodation costs and where they live in New Zealand.

This is an income tested allowance.

What to bring

Please ask Work and Income staff for help if:

- you do not have any of the documents we have asked for
- you would like to know about extra help.

When you apply for the Away From Home Allowance, you need to bring the following information:

1. A birth certificate or passport, and one other form of identification, such as a driver's licence for yourself and partner.
2. Birth certificate for the child.
3. Proof that you are eligible for family tax credit from Inland Revenue.
4. Bank account details.
5. Verification of the tertiary study or employment-related training your child is attending.
6. Verification of your child's accommodation costs.

**This form should be taken to your nearest Work and Income service centre as soon as possible.
The date you apply affects the date you are granted this allowance.**

Privacy Statement

The legislation administered by the Ministry of Social Development allows us to check the information that you give us in this form.

This may happen when you apply for a benefit and at any time after that.

The Privacy Act 1993 requires us to tell you that:

- The information you give us 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.
- 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 services 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 to you and your family
 - providing education related services
- Work and Income may contact health providers to verify any health related information you give us.
- Work and Income may give employers information about you to find you employment. Where Work and Income refer you to a job vacancy, we may also contact the employer to discuss the result of any job interview that you attend.
- Work and Income may share information you have given us with childcare centres to administer your entitlement to childcare.
- Other information that you give us on your skills, aspirations, family circumstances etc, and that is not required to assess your entitlement to a benefit may be used to provide a better service to you by the Ministry of Social Development.
- The information you give us may be compared with information held by 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).
- Under the Tax Administration Act 1994, if you have dependent children, the information you give us 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 Department of Labour, Statistics New Zealand, the Ministry of Justice, the Accident Compensation Corporation, and the Ministry of Education
 - disclose your personal information to your partner.
- Under the Privacy Act 1993 you have the right to ask to see all information we hold about you, and to ask us to correct that information.
- You are not required to give us information: but if you do not give us all the information we ask for your application for benefits may be declined.

Warning

I understand that:

- If** I have made a false statement,
or if I have failed to answer all the questions in full,
or if I do not tell Work and Income about changes in my life that might affect my entitlement or rate,
then my benefit or allowance 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 3 times the value of the overpayment),
or I may be prosecuted and fined or imprisoned.

Obligations

Changes to your living situation include:

- *starting or ending a de facto relationship with someone of the same or opposite sex*
- *change in the number of children supported*
- *change in accommodation costs*
- *marriage or separation*
- *entering or ending a civil union.*

I must tell Work and Income immediately if either my partner, myself or my child:

- intend to travel overseas,
- have changes to my personal details (such as name, address or bank account number),
- have changes to my/our living situation,
- are imprisoned/held in custody on remand,
- are admitted to or discharged from hospital,
- have any other changes that may affect my/our benefit entitlement or rate.

I must also tell Work and Income immediately of any change in the child's situation.

Residency

Tick one box.

11. Indicate which describes your residency situation:

Born in New Zealand › Go to Question 15

Permanent resident › Go to Question 13

New Zealand citizen › Go to Question 13

Other › Go to Question 12

12. What is your immigration status?

13. When did you arrive in New Zealand?

<input type="text"/>	<input type="text"/>	<input type="text"/>
Day	Month	Year

14. Where were you born?

15. Do you normally live in New Zealand?

No Yes

Ethnic Group

This information is for statistics and will be used for research and future work.

16. To what ethnic group do you believe you belong?

<input type="checkbox"/> New Zealand Maori (a)	› To which tribe(s)/ iwi do you belong?	<input type="text"/>	
<input type="checkbox"/> New Zealand European/Pakeha (b)	<input type="checkbox"/> Other European (c)	<input type="checkbox"/> Samoan (d)	<input type="checkbox"/> Cook Islands Maori (e)
<input type="checkbox"/> Niuean (f)	<input type="checkbox"/> Tokelauan (g)	<input type="checkbox"/> Tongan (h)	<input type="checkbox"/> Chinese (i)
<input type="checkbox"/> Indian (j)	<input type="checkbox"/> Other (k) (please specify)	<input type="text"/>	

Bank Details

17. What bank account do you want the benefit paid into?

Name of bank (eg ASB)

Name of branch (eg Lower Hutt)

The account is in the name of:

The account number is:

Bank	Branch	Account number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Parent's Details

18. Are you the child's parent?

Yes › Go to Question 20

No › What is your relationship with the child?

Please give the full name of the natural parents

19. Are you solely responsible for the financial support of this child?

Yes No › Please give details below

Child and Partner Details



Work and Income
Te Hiranga Tangata

A service of the Ministry of Social Development

CLIENT NUMBER

--	--	--	--	--	--	--	--	--	--

Child's Details

20. What is the name of the dependent child you need this allowance for?

21. What is the date of birth of this child?

Day	Month	Year

Partner

A partner is your spouse (husband or wife), your civil union partner, or a person of the same or opposite sex with whom you have a de facto relationship.

22. Do you have a partner?

No Are you: Single Widowed Divorced Living apart/ Separated
 Civil union dissolved Married In a civil union In a relationship

Yes What is your partner's name?

What is your partner's date of birth?

Day	Month	Year

Family Tax Credit

23. Are you currently receiving family tax credit?

No If you do not receive family tax credit you will need to bring a letter from Inland Revenue to show you are entitled to family tax credit.
Yes If you do not receive a benefit you will need to bring a letter from Inland Revenue to confirm your family tax credit payments.

If you are not entitled to family tax credit you do not qualify for this allowance.

Accommodation Details

Child's Address

Give your child's house number, street, suburb and town or city.

24. Where does your child live?

<input type="text"/>	<input type="text"/>
Flat/House no.	Street name
<input type="text"/>	<input type="text"/>
Suburb	City

Rent

Complete if your child pays rent away from home.

Please bring in something that proves how much rent your child has to pay (rent or tenancy agreement).

25. How much is your child's rent payment each week?

\$

26. What is the name, address and phone number of the person the rent is paid to?

<input type="text"/>
<input type="text"/>
<input type="text"/>

Board

Complete if your child pays board away from home.

Please bring in something that proves how much board your child has to pay (letter from landlord).

27. How much is your child's rent payment each week?

\$

28. What is the name, address and phone number of the person the rent is paid to?

<input type="text"/>
<input type="text"/>
<input type="text"/>

Training Verification



Work and Income
Te Hiranga Tangata

A service of the Ministry of Social Development

CLIENT NUMBER

--	--	--	--	--	--	--	--	--	--

CLIENT'S NAME

CHILD'S NAME

Education or Training Details

1. What is the name and address of the tertiary or training organisation?

2. What is the name of the course?

3. Is the training a TOPs course?

Yes

No

▶ Please give details below

4. When will the course start?

Day	Month	Year

5. When will the course finish?

Day	Month	Year

Statement

The information I have given is true and I have not left anything out.

To be signed by the applicant.

▶	APPLICANT'S SIGNATURE
---	-----------------------

Day	Month	Year

Trainer's Statement

I confirm that the above course details are true and complete.

Please get your child's tertiary institution or training organisation to complete this section. This information is required under sections 11 and 12 of the Social Security Act 1964.

▶	TRAINER'S SIGNATURE
---	---------------------

Day	Month	Year

Name of training organisation

Phone number of training organisation



Work and Income
Te Hirainga Tangata

A service of the Ministry of Social Development

CLIENT NUMBER

--	--	--	--	--	--	--	--	--	--

Statement

I must tell Work and Income immediately if either my partner, myself or my dependent child:

- have a change in work situation,
- have changes to my/our income or financial circumstances,
- have changes to personal details (such as name or address or bank account),
- have a change in my dependent child's accommodation costs,
- my dependent child finishes training or study,
- intend to travel overseas,
- are imprisoned/held in remand,
- are admitted to or discharged from hospital,
- have changes to my living situation,
- have any other changes that may affect my/our allowance entitlement or rate.

I have completed all the questions on this Away From Home Allowance application, or this application has been completed for me, and the information I have given is true and complete. The conditions for receiving a benefit have been explained to me and I understand these conditions.

I will apply the Away From Home Allowance toward the cost of my child's care while he or she is on the course.

Name (print)

CLIENT'S SIGNATURE

Day	Month	Year