

Early Learning Payment Application



Work and Income
Te Hiranga Tangata

A service of the Ministry of Social Development

If you need help with this form call us on ☎ 0800 559 009.

About the Early Learning Payment

The Early Learning Payment contributes to the cost of early childhood education for families enrolled in selected Family or Early Start Programmes.

Work and Income pays the Early Learning Payment for children to attend early childhood education as follows:

- for child/ren aged 18 months to less than 30 months – maximum of 20 hours paid per week
- for child/ren aged 30 months to 36 months – maximum of 15 hours paid per week.

Payment is made directly to the early childhood education centre or services. An early childhood education centre or service may be a family day centre, home-based childcare service, Te Kohanga Reo, kindergarten or playcentre.

If your child/ren are absent from the early childhood education centre or service for more than 15 consecutive working days and it charges a fee for holding open places for absent children, we may stop paying for your child/ren to attend. This could mean that the centre or service stops holding a place open for your child/ren.

Information relating to your child/ren's participation in the Early Learning Programme and your child/ren's attendance at the early childhood education centre or service can be exchanged between the Family Start/Early Start Family/Whānau Worker and Work and Income.

You may be able to receive a Childcare Subsidy if you want your child/ren to attend the early childhood education centre or service for more than the maximum number of hours being paid for under this programme. However, you can't receive Childcare Subsidy for the same hours that are paid for directly under this programme.

What you need to do

When you apply for the Early Learning Payment, you will need to complete this application form and:

- read the important information on page 2 of this form
- ask the supervisor of the early childhood centre or service that your child/ren will be attending/are already attending to fill in page 6
- give the form back to your Family/Whānau Worker, who will fill in page 8
- take the form to Work and Income.

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 think there could be a delay in providing this information
- you would like to know about extra help.

When you apply for the Early Learning Payment, you need to provide the following for you and your partner (if you have one):

- Proof of your lawful residence in New Zealand (eg New Zealand birth certificate or current New Zealand passport, or other country passport with residence visa).
- One other form of identification (eg driver's licence, firearms licence or a bank card with signature). If you are unable to provide at least one form of photo identification you will need to provide one further form of identification (3 forms of identification in total).
- A form or letter from Inland Revenue showing your IRD (tax) number.
- Full birth certificates for your children – If your children weren't born in New Zealand, we will need to see proof of their New Zealand citizenship or permanent residency.
- Proof of your residency status (eg visa or certificate of citizenship) if you were not born in New Zealand.

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 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 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.

Obligations

You have the following obligations when you get this assistance:

- you must tell the early childhood education centre or service if your child/ren leaves or is absent (for example, because of holidays or sickness) or if your family leaves Family Start/Early Start
- you must tell us if your personal details change (for example, your name or address).

Important

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 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) **or**
- I may be prosecuted and fined or imprisoned.

Additional information

Your client number is:

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Information required by

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Day Month Year

Contact name

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Client to complete

CLIENT NUMBER

Before you start

Please check that you have all relevant "What to bring" items on the front of this form.

Please complete all questions – if not applicable write N/A.

Name

1. What is your name?

First name(s)

Surname or family name

Q2 note: Give any other names that you use now or have used in the past (including your maiden name).

2. Are you known by or have you used any other names?

No Yes ▶ Please give details below:

1.

2.

3. Are you: Male Female

Q4 note: Please tick one box to show the title you want to be known by.

4. What do you want to be called?

Mrs Miss Ms Mr No title Other

Address

Q5 note: Please give your house number, street, suburb, and town or city.

A house number could include:

- street number
- fire
- RAPID
- emergency services.

Q6 note: A mailing address could include:

- street address
- postal box (PO Box)
- rural delivery details
- C/O address.

5. Where do you live?

Flat/house no. Street name

Suburb City

6. What is your mailing address (if different from above)?

If you live at a rural address please include your rural delivery details here:

7. How can we contact you?

Work phone Home phone Mobile phone

Email Fax

Birth date

8. What is your date of birth?
Day Month Year

Tax number

9. What is your Inland Revenue tax number?

Past benefits

10. Are you currently receiving any assistance from Work and Income?

No Yes ▶ What type of benefit?

Ethnic group


Q11 note: You don't have to answer this question if you don't want to.

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

11. What ethnic group do you belong to?

- New Zealand Māori ▶ Which tribe(s)/iwi?
- New Zealand European Niuean Samoan Indian
- Other European Tokelauan Tongan Chinese
- Cook Island Māori Other ▶ Please specify below:

Residency

 Please provide a copy of your visa or certificate of citizenship.

12. Are you a New Zealander?

- Yes ▶ I was born in New Zealand ▶ Go to Question 16
- ▶ I am a New Zealand citizen ▶ Go to Question 13
- ▶ I am a permanent resident ▶ Go to Question 13
- No ▶ Go to Question 13

13. Where were you born?

14. When did you arrive in New Zealand?

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

15. What is your residency status? (eg citizen, refugee, visitor)

Q16 note: "Usually" means that you consider New Zealand your home, you are a legal resident, normally live and intend to stay permanently in New Zealand.

16. Is New Zealand where you usually live?

- Yes No ▶ Where do you usually live?

Bank details

Q17 note: Work and Income needs this information to complete our records.

The payment will be made directly to the early education centre or service.

17. What are your bank account details?

Name of bank (eg ANZ):

Name of branch (eg Lower Hutt):

The account is in the name of:

The account number is:

	Bank	Branch	Account number
	/	/	

Dependent children currently in your care

Q18 note: A dependent child is a child under 18 years who is financially dependent on you and is living with you as a member of your family.

18. Please provide details about the dependent children in your care?

Child's full name	Relationship to you	Date of birth
1		/ /
Child's full name	Relationship to you	Date of birth
2		/ /
Child's full name	Relationship to you	Date of birth
3		/ /
Child's full name	Relationship to you	Date of birth
4		/ /

If you don't have a partner, please sign your application on page 7

If you have a partner, they will need to complete page 5

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Partner to complete

Before you start

This part of the form is filled in by the partner of the applicant (if there is one).

You can remove and return this part of the form separately if you need to.

Please complete all questions – if not applicable write N/A.

Name

1. What is your name?

First name(s)

Surname or family name

Q2 note: Give any other names that you use now or have used in the past (including your maiden name).

2. Are you known by or have you used any other names?

No Yes ▶ Please give details below:

1.
2.

3. Are you: Male Female

Q4 note: Please tick one box to show the title you want to be known by.

4. What do you want to be called?

Mrs Miss Ms Mr No title Other

Birth date

5. What is your date of birth?

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

Tax number

6. What is your Inland Revenue tax number?

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

The information I have given in this application is true and complete.

I am aware of and understand the New Zealand Privacy Act statement contained in this application form.

Partner's signature

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

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Education Provider to complete

Early childhood education provider details

Q1 note: An early childhood education provider may be a family day centre, home-based childcare service or Te Kohanga Reo, kindergarten or playcentre.

You may be required to provide proof that you are a licensed centre.

1. Are you a licensed early childhood education service?

Yes No ▶ Please discuss with your local Work and Income service centre.

2. What is the name of your childcare centre?

3. What is your childcare centre number? You can find this on your payment statement.

4. Please provide details of the child/ren for whom Early Learning Payment is sought:

Child 1: Name:

Enrolled hours per week: Date they started:
Day Month Year

Fee charged per week for this child: (before payment under this programme) \$

Is this: a flat fee **OR** based on attendance

Child 2: Name:

Enrolled hours per week: Date they started:
Day Month Year

Fee charged per week for this child: (before payment under this programme) \$

Is this: a flat fee **OR** based on attendance

5. Do you charge a fee for any absences the child/ren may have?

No Yes Sometimes

Comments

Education provider statement

You must tell the Family Start/Early Start Family/Whānau Worker and Work and Income straight away if the child/ren leaves or is absent (eg, because of holidays or sickness).

If you don't tell us when the child/ren leave or are absent you may have to pay back any money you are overpaid.

If the child/ren are absent for more than 15 consecutive working days (three working weeks) and you charge a fee for holding open a place for absent children, we may stop paying towards the costs of these fees for the child/ren.

Information relating to the child/ren's participation in the Family Start/Early Start Programme and the child/ren's attendance at the early childhood education provider may be exchanged between the Family Start/Early Start Whānau Worker and Work and Income.

The information I have provided is true and complete.

Education provider's name (print)

Education provider's signature

Day Month Year



Applicant's statement

Please read this statement carefully and then sign it.

I understand that I must tell the early childhood education centre or service straight away if my child/ren leaves or is absent (for example, because of holidays or sickness), or if my family leaves the Family Start/Early Start Programme.

I understand that I must tell you if my personal details change (for example, my name or address), or if there are any other changes (for example, child leaves my care) that could affect my Early Learning Payment.

I agree that:

- I have answered all the questions and all the information I have given is true and complete
- I have read my obligations (or someone has read them to me) and I understand them
- I am also aware of the Privacy Act statement at the front of this form
- Work and Income, staff of the Family Start and Early Start Programmes (including the Family Start/Early Start Whānau Workers), and the early childhood education providers may disclose information to each other that is relevant to my Early Learning Payment.

Applicant please sign here:

Applicant's name (print)

Applicant's signature

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

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Family/Early Start site to complete



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Family/Early Start site's details

1. **Name of Family/Early Start site:**

2. **Address details:**

3. **Please provide details of the family below:**

a. Date enrolled into the Family/Early Start programme:

Day Month Year

b. Case number of family:

c. Family/Whanau Worker assigned to family:

Daytime phone

Mobile phone

Other phone/fax

Email address

4. **Are you in an approved pilot location?**

Yes

No

Family/Early Start Practice Manager sign here:

Applicant's name (print)

Applicant's signature

Day Month Year

OFFICE USE ONLY

Checklist – Approval officer to complete

Meets Social Security Act 1964 dependent child criteria

Yes No

Meets age criteria for programme

Yes No

Is enrolled in a licensed early childhood education centre or service

Yes No

Meets residency criteria

Yes No

Is enrolled in an approved pilot location

Yes No

Payments – Processing officer to complete

Child's full name	Weekly subsidy	Start date	End date
	\$	/ /	/ /
	\$	/ /	/ /
	\$	/ /	/ /
	\$	/ /	/ /
	\$	/ /	/ /

Decision

Granted **Declined**

Comments

Processor's signature

Day	Month	Year

Authenticator's signature

Day	Month	Year

10% 100% Critical data

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Checker's signature

Day	Month	Year

Bring up

B	F
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Day	Month	Year