# **Support Funds** Training Support application form

MINISTRY OF SOCIAL

Training Support is funding to help people with disabilities or health conditions with extra costs relating to training, so they can get or stay in a job, including self-employment.

The funding can cover extra things like equipment, transport, interpreters and other support people.

It can't cover actual training costs, things you've already paid for, or things your trainer must provide to enable any person to do the same training, for example a desk and chair.

There are other conditions which can be found on our website

workandincome.govt	.nz/supportfunds
	fit or extra financial help from us before, write your client number here if you know it. d on your Community Services Card if you have one.
Tell us about you  ATTACHMENT FOR QI: Please provide proof of who you are. What you need to provide is explained on page 8.  HOW TO ANSWER Q2: For example, have you had married names, English names, changes by deed poll, or aliases?  ATTACHMENT FOR Q2: Provide your marriage certificate, deed poll, or other proof of any name change.  4	What is your full name?  Mr Mrs Ms Miss Other  First and middle names  Surname or family name  Have you ever been known by any other name?  No Yes If yes, write all your names out below  1. 2.  What date were you born?  Day Month Year  Are you:  Male Female Gender diverse  What is your Inland Revenue tax number?

ATTACHMENT FOR Q6: You need to provide proof of your bank account details, such as a bank statement or deposit slip.	What bank account would you want your payments to be paid into?  The account is in the name of:  Bank Branch Account number Suffix
To How to Answer Q7:  If you live in a rural area, flat/house number could include your RAPID number, fire number, emergency services number.	Where do you live?  Flat/House number Street name  Suburb  Town/City
Mailing address can include a PO Box, rural delivery details, or C/O address.	Is your mailing address different from where you live?  No Yes If yes, tell us your mailing address
Please only give us contact details you'd like us to use.	How else can we contact you?  Home phone  Mobile phone  Other phone  No  Yes  If yes, tell us your email address  I don't have an email address
Tell us your ethnicity  information for qui: We collect this information for statistics we use in research and future development work.	Tick the group(s) you most identify with.  Māori

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Tell us about your residence status	Do you usually live in New Zealand?  No Yes  What best describes your residence status in New Zealand? Tick only one box.
This means you consider New Zealand your home, you're a legal resident, you usually live here and you intend to stay.	New Zealand citizen by birth  Granted New Zealand citizenship granted  Granted permanent residency  Date citizenship granted  Day Month Year  Day Month Year  Day Month Year  The permanent residence granted  Day Month Year  Day Month Year  Day Month Year  The permanent residence granted  Other  If other, what is your residence status?
Tell us about your income	What's your main source of income?  Employment Benefit Family/Partner  ACC Self-employment  Other If other, please tell us where your income comes from
Tell us about your health condition or disability	Please tell us what your disability or health condition is.
16	Please tell us how your disability or health condition impacts your ability to train or study.

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our training	What do you	need?	Cost
TTACHMENT FOR Q17:			\$
ou'll need to provide quote.			\$
quote.			\$
			•
	18 Is there a	training provider helping you to find or sta	y in work?
	No	If no, go to question 21	
	19 Please tel	l us about the organisation:	
	Training prov	ider's name	
		ider's address	
	Address		
	Contact pers	son's name	
	Phone num	nber ( )	
	Email	he training provider help you while you're	training?
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Tell us about the support you've already applied for	Are you getting any other funding to help with your health condition or disability?  No  If no, go to question 27  Yes  If yes, tell us what the grant or subsidy is for
25	Who are you getting assistance from?
26	Have you approached any other organisations for funding?
	Yes If yes, please provide details

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If you get funding from us, there are some things you need to do to make sure you're getting paid the right amount.

If you don't do these things, we could pay you the wrong amount. It could also mean we have to reduce or stop your payments. We don't want you to miss out on money you need so please read these carefully.



A job could be part-time, casual or full-time, paid or unpaid.

 We can't pay you while you're out of New Zealand unless we've agreed to it.

## Let us know when things change

You need to let us know about changes that might affect the amount you're paid.

Changes to your income or availability for work, like:

- starting, stopping or changing jobs
- starting or finishing part-time or full-time study
- starting to run a business (for yourself or someone else).

Changes to information about you like:

- · name, address, contact details or bank account number
- if your health or disability changes.

We also need to know if you:

- go overseas you need to let us know before you go
- go into or come out of hospital
- are being held in custody or on remand.

If we have the wrong information we could pay you the wrong amount. If we pay you too much you might have to pay us back.





## **Collecting your information**

We collect your personal information, so we can provide income support, NZ Super or Veteran's Pension, Student Allowance, or Loans and connect you with employment, education and housing services. We do this under various Acts, which are all listed on our website at workandincome.govt.nz/privacy

- To help us do this, we collect information about your identity, your relevant history, and your eligibility for our services.
- We get this information directly from you, and we sometimes collect information about you from others, including other government agencies.
- You can choose not to give us your personal information, but we might not be able to help you if you don't.

## **Using your information**

We use the information you give us to make decisions about the best way to help you.

- These decisions may be about:
  - whether you're eligible for our services
  - running our operations and ensuring our services are effective
  - the services we'll provide in the future.

## Sharing your information

Sometimes, we need to share your information outside our Ministry to reach our goal of helping New Zealanders to be safe, strong, and independent.

- To do this, we may share your information with:
  - prospective employers to help you find work
  - contracted service providers that help us to help you
  - health providers if we need your medical information to assess your eligibility
  - other government agencies when we have an agreement with them
  - some other governments if you may be eligible to get or are getting an overseas pension.
- We also share personal information when the law says we have to.

## Respecting you and your information

We make sure we follow the Privacy Act to do what's right when we use your information.

- We treat you and your information with respect, by acting responsibly and being ethical.
- · We make sure any technology we use meets strict security standards so it keeps your information safe.

## Get in touch if you have a question

You have a right to ask to see your personal information, and to ask for it to be corrected if it's wrong.

- If you have a question or a complaint, please get in touch.
- You can find full details about what we do with personal information in our privacy notice at: workandincome.govt.nz/privacy

## **Checklist**



Once you've 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 don't 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 provide

#### 1 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:	
<b>If you were born in New Zealand</b> , provide 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).	
<b>If you were born overseas</b> , provide 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).	
<b>If your name has changed</b> , provide your marriage certificate, deed poll, or other proof of the name change.	
<b>You</b> need to provide <b>two</b> more documents that help to prove who you are (for example, a marriage certificate, bank statement, phone or power account, driver licence).	
Proof of your bank account details, such as a bank statement or deposit slip.	
If you're using identification that has expired, it must not be more than two years past the expiry date.	
Depending on your answers in the application, you may need to provide:	
Evidence of your disability or health condition such as a Medical certificate or letter from your health practitioner, occupational therapist, psychologist, or ACC.	
Evidence of ongoing literacy or learning disabilities such as a SPELD assessment.	
Proof of the costs you're applying for, such as quotes or receipts.	
Details of your employment, such as a contract, letter from your employer or evidence of self-employment.	

## Signature page

## **Applicant**

I have answered all the questions that apply to me and my situation.

The information I have given you is true and complete.

I will do what I need to do to meet my obligations.

I understand what you do with my personal information and how you protect my privacy.

Applical	it shame (print)	Applicant's signature		Day	Month	Year
Help	er's statement					
Compl	ete this if you've helped anyone t	o complete this application form.				
Your firs	t name	Your surname or family nam	е			
Yourado	dress					
Your pho	one number					
(	)					
Tick th	ne box for the statement that ap	pplies				
		m at the request of the person applying. T ements and answers I have completed a	-		-	
		m at the request of the partner of the per e signing. The statements and answers I h partner of the person applying.				
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## **Next Steps:**

Once you've completed your application, you'll need to print and sign it, then send it to us.

You can either:

- print, sign, scan and email your form and supporting documents to us at **support\_funds@msd.govt.nz**
- take it to one of our service centres and we'll scan the documents while you're there
- post it to us at:

Support Funds Team Ministry of Social Development PO Box 1556 Wellington 6140

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