



Parental Benefits helpline number – (01481) 732505

Completed forms should be returned to:-

Social Security

Or email your form to benefits@gov.gg

Edward T Wheadon House

Le Truchot

St Peter Port, Guernsey

GY1 3WH

Please read leaflet before completing this form

Claimant's Details

Social Security number

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First names(s)

--

Surname

--

Address

--

--

Post code

--

Telephone number

--

Date of birth

Day	Month	Year
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Allowance Claim Details

Your partner's Newborn Care Allowance will pay up to the day before you choose to start your claim. Please note we will need their authorisation to stop their benefit on the back of this form.

Requested start date

Day	Month	Year
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Date last worked

Day	Month	Year
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Date due to return to work

Day	Month	Year
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Your claim can only be put into payment once you have finished work

Baby's/Babies' Details

Surname	First name(s)	Date of birth

Payment Details

Newborn Care Allowance is paid into a bank account. Please provide your account details below:-

Name of bank

Sort code

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Account number

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Account holder(s) name(s)

Authorisation to Transfer Newborn Care Allowance

This section should be completed by the person currently in receipt of Newborn Care Allowance in respect of the child/children noted overleaf.

Full name

Date of birth

Day	Month	Year
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I confirm that I wish to transfer the Newborn Care Allowance to

Full name

Date of birth

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

With effect from

Day	Month	Year
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I declare that the above named is my partner

Signature

Date

This declaration should be completed by the person wishing to claim Newborn Care Allowance

I **DECLARE** that to the best of my knowledge and belief the information I have given is true and complete. I know that to give false information may result in prosecution.

Signature

Date



How we collect and use information

The Committee *for* Employment & Social Security processes personal information for social security purposes in order to carry out functions relating to the relevant social security and associated legislation that it administers. Information collected will depend on your business with us, but will be no more than is required for that purpose. We may get information about you from others for any of our purposes if the law allows us to do so. We may also share information with certain other organisations if the law allows us to. Any personal information you give to us will be processed in accordance with the Data Protection (Bailiwick of Guernsey) Law, 2001. If you wish to know more about the information we have about you, or about the way we use it, you can ask at the Office *for* Employment & Social Security.

Please return the completed form to the address on the front page.

Please note if a claim is received more than three months after the birth or the date you wish to start claiming the benefit, it will be treated as a late claim and you may lose benefit.