

	Parental Benefits helpline number – (0148 Completed forms should be returned to:- Or email your form to benefits@gov.gg				1) 732505 Social Security Edward T Wheadon House Le Truchot St Peter Port, Guernsey GY1 3WH					
	Please read leaflet befo	re comp	leting th	nis form						
	Claimant's Details									
	Social Security Number									
	First names(s)									
	Surname									
	Address									
	Post Code									
	Telephone Number		ľ	1						
	Date of birth	D	Pay M	onth	Year					
	Allowance Claim Def Your partner's Parental a claim. Please note we w form.	Allowand	•		•	•		•		
	Requested start date	Day	Month	Year	Date last	worked	Day	Month	Year	
	Date due to return to work	Day	Month	Year	Your claim can only be put into payment once you have finished work					
	Child's/ren's Details									
	Surname			First name(s)				Date of birth		
						• •				

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Payment Details	
Parental Benefits are paid in	to a bank account. Please provide your account details below:-
Name of bank	
Sort code	
Account number	
Account holder(s) name(s)	

Full name				Da	te of birth	Day	Month	Year
l confirm that I	wish to tr	ansfer th	e Parent	tal Allowan	ice to			
Full name				Da	te of birth	Day	Month	Year
With effect fro	n Day	Month	Year					
I declare that t	ne above r	named is	my partr	ner				
Signature								
This declaratio	n should b	e comple	eted by th	he person	wishing to c	laim Par	ental Allo	owance

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 child is placed with you or the date you wish to start claiming benefit, it will be treated as a late claim and you may lose benefit.

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