



Claim for Newborn care allowance

Completed forms should be returned to:- Or email your form to benefits@gov.gg	Social Security Edward T Wheadon House Le Truchot St Peter Port, Guernsey GY1 3WH (01481) 221000
Parental Benefits helpline number –	

Claimant's Details

Social Security number

First name(s)

Surname

Address

Postcode

Telephone number

Date of birth

Day	Month	Year
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Allowance Claim Details

Your partner's newborn care allowance will continue until the day before you choose to start your claim (if applicable). Please note we will need their authorisation to stop their claim 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
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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.

Please return the completed form to the address on the front page once you have finished work.

Please note if a claim is received more than three months after the transfer date, it will be treated as a late claim and you may lose benefit.

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 will process any personal data which you provide, via this form, in accordance with the Data Protection (Bailiwick of Guernsey) Law, 2017. Further information about how your personal data is processed can be found at www.gov.gg/dp or alternatively you may call 01481 221000 and request a paper copy.