



What is Working Family Payment?

Working Family Payment is a weekly tax-free payment for employees with children. It gives extra financial support to families with children depending on their incomes and family size.

How do I qualify for Working Family Payment?

You can qualify for Working Family Payment if:

- Your income is calculated to be below a certain amount;
- You have one or more children;
- You work 38 hours or more a fortnight in paid employment. You can also combine your weekly hours with your partner's hours to help meet this requirement;
- You are the highest earner in your relationship; and
- Your employment is expected to continue for at least three months.

What do I need to complete this application form?

You will need your Personal Public Service (PPS) Number along with information on where you live, your children, your relationship status and where you want your payment to issue. You will also need to provide:

- Your children's and partner's date of birth and PPS Numbers;
- Details of your and your partner's employment status and information from your most recent payslips;
- Details of any income you or your partner receive from all sources in Ireland and abroad; and
- A letter from the school or college, that your children attend, if they are between 18 and 22 years of age and in full time education.

How do I apply?

- You can apply online at **MyWelfare.ie**; or
- Send this completed form to:
 - Working Family Payment Section
Department of Social Protection
St. Oliver Plunkett Road, Letterkenny
Co. Donegal
F92 T449

How to complete this application form?

- Use this page as a guide to filling in this form. There are examples on the back.
- Use black ballpoint pen.
- Use BLOCK LETTERS and place an X in the relevant boxes.
- Answer all questions that apply to you, leave blank any that don't apply.
- Read Part 7 checklist and sign the declaration in Part 1.

If you need any help to complete this form, please contact the Working Family Payments Section on 074 9164575. You can also contact your local Intreo Centre, Social Welfare Office or any Citizens Information Centre. You can find the name and address of your local Intreo Centre or Social Welfare Office by visiting **www.gov.ie/intreocentres**

For more information on Working Family Payment visit **www.gov.ie/WFP**

How to fill in this form

To help us to process your application, write letters and numbers clearly and use one box for each. Please see examples below.

1. Your PPS Number:

1	2	3	4	5	6	7	T	
---	---	---	---	---	---	---	---	--
2. Title, insert an **X** or specify: Mr

--

 Mrs

X

 Ms

--

 Other

--	--	--	--	--	--	--
3. Surname:

M	U	R	P	H	Y											
---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--
4. First names:

M	A	U	R	E	E	N										
---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--
5. First names as they appear on your birth certificate:

M	A	R	Y													
---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--
6. Birth surname:

M	C	D	E	R	M	O	T	T								
---	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--
7. Your date of birth:

2	8
---	---

0	2
---	---

1	9	7	0
---	---	---	---

D D M M Y Y Y Y
8. Your mother's birth surname:

K	E	L	L	Y												
---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--

Contact Details

9. Your address:

1		N	E	W		S	T	R	E	E	T																						
O	L	D		T	O	W	N																										
D	O	N	E	G	A	L		T	O	W	N																						
County DONEGAL																	Eircode A 6 5 F 4 E 2																
10. Your mobile number:

0	8	8	1	2	3	4	7	8	9								
---	---	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--
11. Your email address:

M	M	U	R	P	H	Y	@	W	E	L	F	A	R	E	.	I	E		

SAMPLE

12. Are you?

☐ Single

☐ Married

☐ Separated

☐ Divorced

☐ Widowed

☐ Cohabiting

☐ In a Civil Partnership

☐ A surviving Civil Partner

☐ A former Civil Partner

(you were in a Civil Partnership that has since been dissolved)

Part 2

Your spouse's, civil partner's or cohabitant's details

If you have a spouse, civil partner or cohabitant, please state:

13. Their PPS Number:

14. Title, insert an X or specify: Mr ☐ Mrs ☐ Ms ☐ Other

15. Their surname:

16. Their first names:

17. Their birth surname:

18. Their date of birth:

D

D

M

M

Y

Y

Y

Y

19. Their address:

Only answer this question if you are married or in a civil partnership and do not live together.

20. How many children do you wish to claim for?

under age 18

age 18 - 22 in full-time education

You must attach written confirmation from the school or college for children aged 18 - 22.

If you are claiming for children, please provide their details below.

Child 1

First names:

PPS Number:

Date of birth:

Does the child live with you?

☐

Yes

☐

No

Child 2

First names:

PPS Number:

Date of birth:

Does the child live with you?

☐

Yes

☐

No

Child 3

First names:

PPS Number:

Date of birth:

Does the child live with you?

☐

Yes

☐

No

Child 4

First names:

PPS Number:

Date of birth:

Does the child live with you?

☐

Yes

☐

No

Note: A separate sheet of paper can be used for details of other children you have.

Part 4

Your and your spouse's, civil partner's or cohabitant's work and income details

21. What is your employment status?

Employed ☐

Self-employed ☐

Employed and
self-employed ☐

Unemployed ☐

If employed, provide your employer's details:

Employer's name:

Employer's address:

Employer's registered
number:

--	--	--	--	--	--	--	--	--	--

Employer's telephone
number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Employer's email address:

When did you start
this job?

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

22. How many hours do you
work a fortnight?

--	--	--

23. What is your hourly
rate of pay?

€

--	--	--

 .

--	--

24. What is your spouse's civil partner's or cohabitant's current employment status?

Employed ☐

Self-employed ☐

Employed and self-employed ☐

Unemployed ☐

If employed provide their employer's details:

Employer's name:

Employer's address:

Employer's registered number:

Employer's telephone number:

Employer's email address:

When did they start their job?

D

D

M

M

Y

Y

Y

Y

25. How many hours do they work a fortnight?

26. What is their hourly rate of pay? € .

Part 5

Your and your spouse's, civil partner's or cohabitant's financial information

You will need your own and your spouse's, civil partner's or cohabitant's most recent payslip to answer the questions below.

For questions 27 and 28 below, year to date (YTD) figures are required. Year to date figures are higher than the figures for this period of pay. All payslips have different terms so please review the questions carefully to help you locate the correct figures from your payslip.

Learn more about where to find appropriate figures on your payslips at www.gov.ie/wfp

27. What are your insurable weeks worked, pay and tax details?

Year to date	You	Spouse, civil partner or cohabitant
Insurable weeks worked		
Taxable pay	€	€
USC	€	€
Tax	€	€
PRSI	€	€

28. Are you, your spouse, civil partner or cohabitant self-employed?

	You	Spouse, civil partner or cohabitant
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes , please state:	
What is your self-employment source?		
Net profit:	€	€

If yes, please insert a copy of your or your spouse, civil partner or cohabitants most recent accounts.

29. Are you, your spouse, civil partner or cohabitant receiving maintenance?

	You	Spouse, civil partner or cohabitant
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes , please state:	
How often is maintenance received?	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
Amount:	€	€

Maintenance is where you receive financial contributions from a former spouse, civil partner, cohabitant or parent of your children.

If you answered yes to Question 29, please complete Question 29(a)

29(a). Are you, your spouse, civil partner or cohabitant paying rent or a mortgage?

	You		Spouse, civil partner or cohabitant	
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes , please state:			
How often is the rent or the mortgage paid?	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly
Amount:	€		€	

30. Do you, your spouse, civil partner or cohabitant rent out a room, property or land?

	You		Spouse, civil partner or cohabitant	
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes , please state:			
How often is rental income received?	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly
Amount:	€		€	

31. Do you, your spouse, civil partner or cohabitant receive a private pension? Irish State pension should **not** be included.

	You		Spouse, civil partner or cohabitant	
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes , please state:			
How often is private pension received?	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly
Amount:	€		€	

32. Do you, your spouse, civil partner or cohabitant receive income from attending any education or training course? This includes SOLAS, VTOS, FETAC, Community Employment (CE), Tús Gateway and Rural Social Scheme (RSS).

	You		Spouse, civil partner or cohabitant	
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes , please state:			
How often is income received?	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly
Amount:	€		€	

33. Do you, your spouse, civil partner or cohabitant receive an income from another country?

	You		Spouse, civil partner or cohabitant	
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes , please state:			
How often is the income received?	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly
From which country?				
Amount:	€		€	

If you are unsure if an income you receive is considered for Working Family Payment, please provide details in the box below. We will decide if it is assessed as income.

Your payment details

Please provide your current, deposit or savings account details for payment.

The account must be in your name or jointly held by you.

You will find the details requested below printed on statements from your financial institution.

Name of financial institution:

[illegible]

Bank Identifier Code (BIC):

[illegible]

International Bank Account
Number (IBAN):

[illegible][illegible]

Names of account holders:

Name 1:

[illegible]

Name 2, if any:

[illegible]

Part 7

Checklist

Have you:

- ☐ Answered all the questions?
- ☐ Completed all the employment details?
- ☐ Provided bank details into which your payment can be made?
- ☐ Signed the Declaration in Part 1?

Have you enclosed the following:

- ☐ Your own most recent payslip.
- ☐ Your spouse, civil partner or cohabitant's most recent payslip.
- ☐ Copy of most recent accounts if you, your Spouse, Civil Partner or cohabitant are self-employed.
- ☐ A letter from the school or college, that your children attend, if they are between 18 and 22 years of age and in full time education? Please refer to question 20.

If you started work recently and you don't have all these details, we will look for information about your employment later.

Send this completed application form to:

Working Family Payment Section

Department of Social Protection
St. Oliver Plunkett Road,
Letterkenny
Co. Donegal
F92 T449

For more information

Visit: **www.gov.ie/WFP**
Email: **wfpnewclaims@welfare.ie**
Phone: 074 9164575

If you have any difficulty in filling in this form, please contact the Working Family Payment Section, your local Intreo Centre, Social Welfare Office or any Citizens Information Centre.

Data Protection Statement

The Department of Social Protection administers Ireland's social protection system. Customers are required to provide personal data to determine eligibility for relevant payments and benefits. Personal data may be exchanged with other government departments or agencies where provided for by law. Our data protection policy is available at **www.gov.ie/dsp/privacystatement** or as a hard copy.

Explanations and terms used in this form are intended as a guide only and are not a legal interpretation.