



# Widowed or Surviving Civil Partner Grant

- Please use BLOCK LETTERS.
- Please use BLACK INK and complete all questions.
- If a question does not apply to you, please leave the answer area blank.
- For more information, log on to **www.gov.ie**.

## Part 1

## Your own details

1. Your PPS Number:

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2. Title: (insert an **X** or specify)

Mr.	<input type="checkbox"/>	Mrs.	<input type="checkbox"/>	Ms.	<input type="checkbox"/>	Other							
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3. Surname:

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4. First name(s):

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5. Your birth surname:

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6. Your mother's birth surname:

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7. Your date of birth:

D	D	M	M	Y	Y	Y	Y		

## Contact Details

8. Your address:


9. Your telephone number:

																MOBILE
																LANDLINE

10. Your email address:


## Declaration

I declare that all the information I have given on this form is accurate.

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Signature (not block letters)

Date:

				2	0		
D	D	M	M	Y	Y	Y	Y



Part 1 continued

Your own details

11. Date of marriage or civil partnership?

D

D

M

M

Y

Y

Y

Y

Part 2

Details of your qualified child(ren)

12. How many children are normally resident with you?

under age 18

age 18 - 22 in full-time education

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

Please state child's:

Surname:

First name(s):

PPS Number:

Surname:

First name(s):

PPS Number:

Part 3

Details of deceased

13. Their PPS Number:

14. Their surname:

15. Their first name(s):

16. Their date of birth:

D

D

M

M

Y

Y

Y

Y

17. Their date of death:

D

D

M

M

Y

Y

Y

Y



Part 4

Your payment details

You can get your payment direct to your current, deposit or savings account in a financial institution. Please complete details below.

Financial Institution

You will get the following details printed on statements from your financial institution.

Name of financial institution:

Sort code:

Account number:

Bank Identifier Code (BIC):

International Bank Account Number (IBAN):

Name(s) of account holder(s):

Name 1:

Name 2 (if any):

Important see Checklist in part 5.



**Have you enclosed the following?**

**— Letter from school or college**

(if any of the child(ren) are aged between 18 and 22 and in full-time education)

**If you were born, married or entered into a civil partnership outside the Republic of Ireland:**

**— Your birth certificate**

**— Your marriage certificate or civil partnership registration certificate**

**— Your late spouse's or civil partner's death certificate. If you do not yet have a death certificate for them, attach a press cutting showing their date of death, a Coroner's report is also acceptable**

**— Your child(ren)'s birth certificate(s)** (if born outside the Republic of Ireland and if applying for an increase for them). Birth Certificate(s) are not necessary if you are already getting Child Benefit.

**Original certificates only.**

**Please remember to sign the declaration in Part 1.**

**If you have any difficulty in filling in this form, please contact your local Social Welfare Office or Citizens Information Centre.**

**Send this completed application form to:**

**Widow's, Widower's or Surviving Civil Partner's Pension Section**

Department of Social Protection

Social Welfare Services

College Road

Sligo

**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/benefits. Personal data may be exchanged with other Government Departments/Agencies where provided for by law. Our data protection policy is available at [www.gov.ie/dsp/privacystatement](http://www.gov.ie/dsp/privacystatement) or in hard copy.

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

