Application form for



Jobseeker's Allowance or Benefit

What is Jobseeker's Allowance or Benefit?

Jobseeker's Benefit (JB) offers income support to people who become unemployed and are available for and genuinely seeking full-time work. Jobseeker's Benefit is based on a person's PRSI contribution record.

Jobseeker's Allowance (JA) offers income support to people who become unemployed and are available for and genuinely seeking work. Jobseeker's Allowance is a means tested payment.

Who can get Jobseeker's Allowance or Benefit?

You may be eligible for Jobseeker's Benefit if you are aged over 18 and under 66 and:

- Have paid at least 104 PRSI employment contributions at Class A or H
- Or
 - Have paid at least 156 PRSI self-employment contributions at Class S

And

• Have paid at least 39 PRSI employment contributions at Class A and H or have credited contributions in the governing tax year. (**Governing Tax Year** is the second last complete tax year. For example for a claim in 2019 the second last complete tax year is 2017).

And

• You are genuinely seeking work and are available for full-time work

You may be eligible for Jobseeker's Allowance if you are over 18 and under 66 and:

- You satisfy a means test
- You are genuinely seeking work and are available for full-time work

How will I be paid?

Jobseeker's Benefit or Allowance will be paid in to your local post office. The rate will be based on your earnings in the governing tax year. You may also qualify for increases for your:

- Spouse
- Civil partner
- Partner
- Co-habitant, or
- Your children

How long will the payment last?

Jobseeker's Benefit will last for a total of 6 or 9 months. The number of months depends on the total amount of PRSI employment contributions you have paid during your working life.

To be eligible for this scheme for 9 months you must be aged over 18 and under 66 and:

• Have paid at least 260 PRSI employment contributions at Class A or H

To be eligible for this scheme for 6 months you must be aged over 18 and under 66 and:

• Have paid less than 260 PRSI employment contributions at Class A or H

Jobseeker's Allowance will last for as long as you continue to meet the conditions of the scheme. You must be available for and genuinely seeking full-time work and satisfy a means test.

Where can I find out more information and how do I apply?

If you want to find out more about Jobseeker's Benefit or Allowance, you should contact your local Intreo Centre or Branch Office. They will explain how the process works and give you an application form. The form is also available to download from **www.welfare.ie**

How to fill this form

To help us in processing your application:

- Print letters and numbers clearly.
- Use one box for each character (letter or number).

Please see example below.

		Applicant	Spouse, Civil Partner or Cohabitant								
	Please state: Personal Public Service	FIGURES LETTER(S)	FIGURES LETTER(S)								
•	Number (PPS number)	1 2 3 4 5 6 7 A	1 2 3 4 5 6 7 B								
	same as RSI/Tax Number:										
•	First name(s):	MAUREEN	SEAN								
•	Surname:	MURPHY	MURPHY								
•	Birth Surname if different:	LYNCH									
•	Mother's Birth Surname:	MCDERMOTT	FITZPATRICK								
•	Address	1 NEW STREET,	1 NEW STREET,								
	(If you and your spouse,civil partner	OLD TOWN, DONEGAL TOWN,	OLD TOWN, DONEGAL TOWN,								
	or cohabitant are not living together give both	DONEGAL	DONEGAL								
	Addresses):										
•	Postcode:	A65F4E2	A65F4E2								
•	Telephone/Mobile Number:	0871234567									
•	Email address:	EXAMPLE@mail.com									
•	Nationality:	IRISH	IRISH								
•	Normal occupation:	BUILDER									
•	Date of Birth:	2 8 0 2 1 9 7 0									
		D D M M Y Y Y Y									
	CΛ	$\Lambda \Lambda \Box$									

Application form for

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2.



Jobseeker's Allowance or Benefit



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	ase complete in Black Pen. ase use BLOCK LETTERS.											
Par		coha	RSONAL DETA abitant: (If you o need to list his/her afit).	lo not wish	to claim fo	or a spo	ouse, civil	partne	r or coha	abitan		•
			A	Applicant			Spous	e, Civi	l partn	er or	Coha	oitant
1. Pl∉ ∙	ease state: Personal Public Service Number (PPS number) same as RSI/Tax Numb		FIGUE	RES	LETT	ER(S)		FIGUR	ES		LETI	TER(S)
•	First name(s):											
•	Surname:											
•	Birth Surname if differen	nt:										
•	Mother's Birth Surname:	:										
•	Address (If you and your spouse,civil partner or cohabitant are not living together give both Addresses):	I										
•	Postcode:											
•	Telephone/Mobile Numb	ber:										
•	Email address:											
•	Nationality:											
•	Normal occupation:						L					
•	Date of Birth:	L	D D M	M Y	Y Y	Y						
2. Are	e you?		Single Separa In a Civ Partner	il		Divo a fori Civil	abiting rced mer ner(A divil		W a C	arrie 'idow surviv vil artner	red /ing	

partnership since dissolved)

Pa	Part 2 Habitual Residence Con							n				
	Habitual Residence is a condition that you must satisfy to qualify for Jobseeker's Allowance. Log on to <u>www.welfare.ie</u> for more information about Habitual Residence.											
3.	In what country were you	oorn?										
4.	What is your nationality?											
	Note: The Common Travel Area is Ireland, Great Britain, the Isle of Man and the Channel Islands.											
	You can spend brief periods on short holidays, studying or travelling outside the Common Travel Area and still be habitually resident here.											
5.	Have you lived in the Com Travel Area all of your life?		Γ	YES			NO					
						•		stion 10	and	11		
	If No , please go to question 6 to 8											
6.	Have you lived in the Com Travel Area for the last two			YES			NO					
	If No , please give details below about each country outside the Common Travel Area where you have lived.											
	Country	П	ate		-1-		N	/huuau		ما 414 م		
	country		om	to	ate			/hy you	live	a thei	re	
								my you	live		re	
								ny you			re	
								ny you			re	
7.	When did you come to Irel	fr									re	
7.		fr	om			 Y		Y Y			re	
7.		and?	om			 М Ү					re	
7.	When did you come to Irel Have you lived continuous	and? ly in arrived? nily, for	om	D D	 M N	M Y	Y				re	
	When did you come to Irel Have you lived continuous Ireland since the day you a Does any of your close far example parent, brother, s	and? ly in arrived? nily, for ister or	om	D D YES	 M N	M Y	Y				re	

Name	Address	Month	Year	to you	came to Ireland

Part	2 (continued)	Habitua	l Re	sidence C	ond	ition
9.	Have you ever made an application for Refugee Status?			YES		NO
	If YES , please answer questions from the Department of Justice a			ow and give o	copie	s of all relevant documents
9a.	Are you awaiting a decision on an application for Refugee Status?			YES		NO
9b.	Have you been granted Refugee Status, or Leave to Remain in the State on other grounds?	[YES		NO
10.	Please state where you lived in the Common Travel Area:			Ireland Isle of Man		Great Britain Channel Islands
11.	Have you lived at the same address for the last two years?			YES		NO
	If NO , please give details of previous addresses:					
La	ast address			Previous a	Iddre	SS
	rom]	From		
T	0			То		

For Official Department use only

HRC Satisfied

HRC Not Satisfied

HRC1 issued

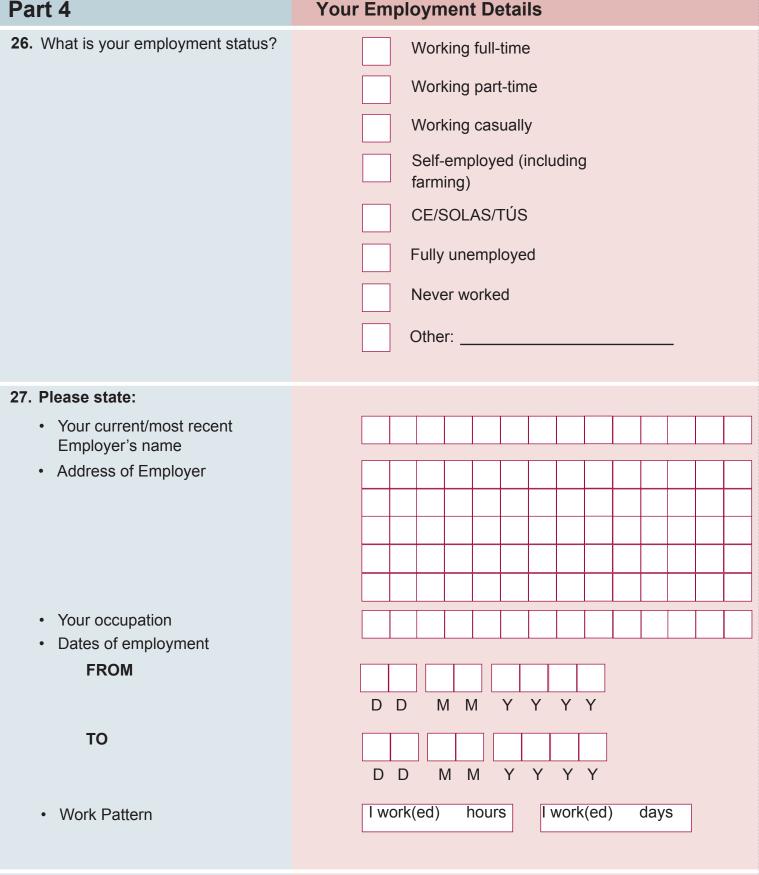
Jobseeker's Claim

Some of the following questions may appear similar but they are necessary to complete your application and to tailor our employment support services to your individual needs.

12. Have you made an unemployment claim in the last five years?	YES NO If Yes , please complete question 12(a) If No , please go to question 13
12a. Were you signing on for twelve months or more?	YES NO
13. Have you been on a Community Employment (CE) Scheme in the last five years?13a. Were you on this Scheme for	YES NO If Yes , please complete question 13(a) If No , please go to question 14
twelve months or more?	YES NO
14. Which of the following categories best describes the highest level of education you have completed?	 No education beyond primary/national school or left school at or before age 15 Junior/Intermediate or Group Certificate (or equivalent) or left school at 16 or 17 Leaving Certificate/Matriculation (or equivalent) or left education at 18 or 19 Third Level Award (Certificate, Diploma or Degree) or left education at 20 or older
15. Have you ever completed an apprenticeship training programme (i.e. qualified or got your papers)?	YES NO
16. What is the size of the location where you live? Is it a:	 Rural area Village (up to 2,000 inhabitants) Town (2,000 - 10,000 inhabitants) Large town or city (more than 10,000 inhabitants)
17. When were you last in paid employment or self-employed?	 Still in employment (go to 17a) In the last month (go to 17b) In the last year (go to 17b) In the last 5 years (go to 17b) Over 5 years ago (go to 17b) Never (go to 19)

Part 3 (continued)	Jobseeker's Claim
17a. If you are still in employment how long are you in your current job?17b. If you are no longer in employment, how long did your last job last?	Less than 1 month1 - 2 years1 - 6 months2 years or more6 - 12 months1 - 2 yearsLess than 1 month1 - 2 years1 - 6 months2 years or more6 - 12 months2 years or more
18. If you are still in employment, what are your gross weekly earnings?If you are no longer in employment, what were your gross weekly earnings?	 €
19. Do you have the use of a car, van or motorcycle?	YES NO
20. Do you live within usable distance of public transport?	YES NO
21. Have you ever thought about moving location to take up a job?	YES NO
22. Have you any difficulty with reading or writing or numbers?	YES NO
23. In general, how would you describe your health?	Would you say it is? Very Good Bad Good Very Bad Fair
24. How well do you speak English?	Very Well Not Well Well Not at all
25. In which country were you born?	

Your Employment Details



28. Why did your employment end/ working hours get reduced?



Part 4 (continued)

Your Employment Details

- **29a.** Did you get a redundancy payment?
 - If **YES** please state:
 - Amount received
 - Date received
- **29b.** Did you get a redundancy form RP50?

If **YES** please supply a copy of same.

30a. Have you had any other employment in Ireland in the last 2 years?

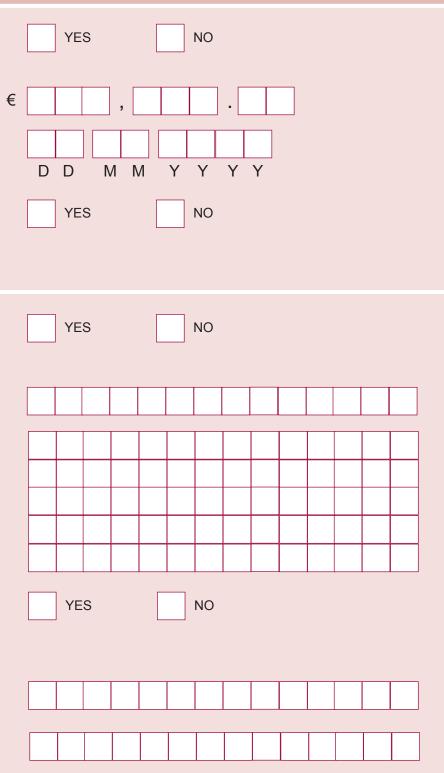
If Yes, please state:

- Name of employer
- Address of employer

30b. Have you had other employment in another EU country in the last 2 years?

If Yes, please state:

- EU country
- Social Security Number/ European Number



Details of Availability/Efforts to Find Work

32. Please State:											
 Type of work you are looking for? 											
 Are you available for full-time work? 		YE	S		NO						
 Are you looking for full-time work? 		YE	S		NO						
 Would you accept any other type of work? 		YE	S		NO						
If No , please give details											
33. Are you currently registered with any school, college or university?		YE	S	1	NO						
If Yes, please state:				 							
Name of college											
Course name											
 What type of student are you registered as? 		Fu	ll-time	- F	Part-	-time	Э	Or	nline	•	
		Fu	ll-time		Part-	-time	9	Or	nline	•	
registered as?Hours of attendance (evenings		Fu	II-time		Part-	-time	e	nO I	nline	•	
registered as?Hours of attendance (evenings included)		Fu			Part-	-time	e	nO [nline	;	
 registered as? Hours of attendance (evenings included) When will the course end? Do you intend to resume college education in the coming 	5		S			-time	2	Or	nline	•	
 registered as? Hours of attendance (evenings included) When will the course end? Do you intend to resume college education in the coming academic year? 34. Are you receiving or have you recently applied for any Social Welfare (including Working Family Payment)/Social Security payments from this Department or from any 			S		NO	-time		Or	nline		
 registered as? Hours of attendance (evenings included) When will the course end? Do you intend to resume college education in the coming academic year? 34. Are you receiving or have you recently applied for any Social Welfare (including Working Family Payment)/Social Security payments from this Department or from any other EU member state? 			S		NO	-time	2		nline		
 registered as? Hours of attendance (evenings included) When will the course end? Do you intend to resume college education in the coming academic year? 34. Are you receiving or have you recently applied for any Social Welfare (including Working Family Payment)/Social Security payments from this Department or from any other EU member state? If Yes, please state: 			S		NO				nline		
 registered as? Hours of attendance (evenings included) When will the course end? Do you intend to resume college education in the coming academic year? 34. Are you receiving or have you recently applied for any Social Welfare (including Working Family Payment)/Social Security payments from this Department or from any other EU member state? If Yes, please state: Type of payment 	€		S		NO						
 registered as? Hours of attendance (evenings included) When will the course end? Do you intend to resume college education in the coming academic year? 34. Are you receiving or have you recently applied for any Social Welfare (including Working Family Payment)/Social Security payments from this Department or from any other EU member state? If Yes, please state: Type of payment Claim number 			S		NO						
 registered as? Hours of attendance (evenings included) When will the course end? Do you intend to resume college education in the coming academic year? 34. Are you receiving or have you recently applied for any Social Welfare (including Working Family Payment)/Social Security payments from this Department or from any other EU member state? If Yes, please state: Type of payment Claim number Weekly amount 			S		NO						

35. Do you wish to claim for a spouse/civil partner or cohabitant?

Please attach the latest pay

slips

Your Spouse/Civil Partner or Cohabitant's Income Details

YES NO NO If **Yes**, please answer questions 36 to 43.

If No, please go to question 44.

36.	Is anyone claiming for you as a Qualified Adult on their Social Welfare payment? If Yes , please state:	YES NO
	Type of payment	
	Their name	
	Weekly amount	€
	Their PPS number	
37.	Does your spouse/civil partner or cohabitant have any account(s) in a Bank, Building Society, Post Office, Credit Union or any other financial institution in Ireland or any other country or any cash savings?	YES NO
	If Yes , please state the total amount of savings:	€
38.	Does your spouse/civil partner or cohabitant have any investment accounts including stocks, bonds or shares in Ireland or any other country?	YES NO
	If Yes , please state the total value of investments:	€
39.	Does your spouse/civil partner or cohabitant have earnings from full-time or part-time employment or self-employment (including farming) in Ireland or any other country? If Yes , please state:	YES
	How often is s/he paid?	Weekly Fortnightly Monthly
	Gross weekly income:	
	Please complete form UP1(f) if self-employed.	Gross weekly income is your weekly income before tax, PRSI, union dues or other deduction.

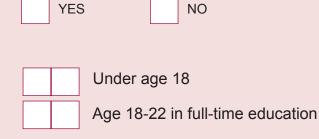
Your Spouse/Civil Partner or Cohabitant's Income Details

40.	Does your spouse/civil partner or cohabitant receive any payment under a Maintenance Grant or a Deed of Covenant? If Yes , please state total weekly amount:	€	YES],		NO].[
41.	Does your spouse/civil partner or cohabitant have other income from any other source? (Compensation, redundancy, rental income, private pension, etc.) If Yes, please state:		YES	8		_ N	10				
	Source of any other income										
	Weekly amount	€			•						
	Total amount (Redundancy/Compensation)	€		,				-			
42.	Does your spouse/civil partner or cohabitant have a social welfare payment from any other country? If Yes , please state:		YE:	6		- N	10				
	Country of payment										
	Type of payment										
	Weekly amount	€].[
	Address of issuing office										
	Social Security Number										
	Social Security Number										
43.	Does your spouse/civil partner or cohabitant have any house, property or land not occupied by you, in Ireland or any other country?		YES	6			10				
	If Yes, please give details										

Details of your Children

44. Do you wish to claim an increase for children who normally live with you and who are being supported by you?

If **Yes**, how many children do you wish to claim for?



Please state:

Child 1

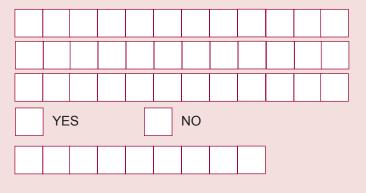
Surname

First name(s)

Relationship to you

Does the child live with you?

PPS Number



Child 2

Surname

First name(s)

Relationship to you

Does the child live with you?

PPS Number

Child 3

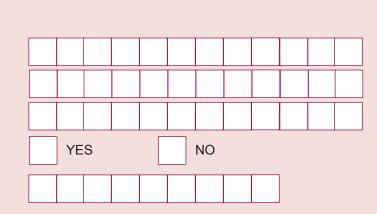
Surname

First name(s)

Relationship to you

Does the child live with you?

PPS Number



NO

You **must** attach written confirmation from the school or college for the child(ren) aged 18-22. **Note:** A separate sheet of paper can be used for details of additional children, if any.

YES

Part 8	Late Claims
45. If you did not claim as soon as you became unemployed, please state the reason why:	
Please state the date from which you wish to claim	

Optional Jobseeker's Allowance

46. Do you wish to apply for Optional Jobseeker's Allowance if you do not qualify for the full rate of Jobseeker's Benefit?

	 1
YES	NO

Payment Method

Payment will be made at your local Post Office. Please list below the name and address of the Post Office at which you wish to be paid. If you are employed on a part-time basis or you are 62 years of age or over you may be paid in a financial institution of your choice. Please supply details below.

Dest Office Name and Address					-	-	1						-	
Post Office Name and Address:														
Please give details of the financial i	institution a	at wh	nich	you	wis	h to	rece	eive	you	r pa	yme	ent.		
Please give details of the financial i Name of financial institution:	institution a	at wh	nich	you	wis	h to	rece	eive	you	r pa	yme	ent.		
	institution a	at wh	nich	you	wis	h to	reco	eive	you	r pa	yme	ent.]	
Name of financial institution: Bank Identifier Code (BIC):	institution a	at wh	nich	you	wis	h to		eive	you	r pa	yme	ent.		
Name of financial institution: Bank Identifier Code (BIC): International Bank	institution a	at wh		you	wis	h to		eive	you	r pa	yme	ent.		
Name of financial institution: Bank Identifier Code (BIC):	institution a	at wh		you	wis	h to			you	r pa	yme	ent.		

I declare that,

- a) I am unemployed and unable to get suitable full-time work.
- b) I am capable of, available for and genuinely seeking work.
- c) I have not claimed nor am I getting any other benefit, pension or allowance from any source apart from those shown in this form.
- d) I will notify the Department if I get work.

I declare that the information given by me on this form is truthful and complete. I understand that if any of the information I provide is untrue or misleading or if I fail to disclose any relevant information, that I will be required to repay any payment I receive from the Department and that I may be prosecuted. I undertake to immediately advise the Department of any change in my circumstances (commence employment/self-employment, family circumstances etc.) which may affect my continued entitlement.

YOUR SIGNATURE		DATE
----------------	--	------

(NOT block letters)

If you are not able to sign, your mark should be made and witnessed. The witness should sign below.

	DATE
AME OF ITNESS	
DDRESS OF ITNESS	

Warning: If you make a false statement or withhold information, you may be prosecuted leading to a fine, a prison term or both.

Please bring this completed application form to your local Intreo Centre or Branch Office when you attend to make your claim.

Data Protection Statement

The Department of Employment Affairs and 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.welfare.ie/dataprotection or in hard copy.

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

Between: The Department of Employment Affairs and Social Protection and

PPS Number					

The Department of Employment Affairs and Social Protection is committed to providing comprehensive employment support and income support services to our clients. Our goal is to help our clients in two ways: firstly by providing income support during periods of unemployment; secondly by helping clients to find work.

In return we would like you, our client, to commit yourself to work with us as we work to help you. This document records our mutual obligations to each other.

Our Promise to You	Your Promise to Us
 We will do all we can to process claims as quickly and as efficiently as possible. 	 I will work to secure employment at the earliest possible opportunity. I will work with the Department to agree
 We will pay income support payment(s) as provided for in legislation in an efficient and timely manner. We will work to identify suitable employment, work experience or training/education/personal 	 my Personal Progression Plan. I will attend meetings to which I am invited by the Department. I will follow up all suggestions and take up any work placement, work experience
 We will work with you to help you prepare your Personal Progression Plan to assist you to take the right steps to employment. 	 and/or training/personal development places notified to me by the Department. I will inform the Department immediately if I find work, or if I am no longer available for work.
 We will monitor and review progress against this plan with you. We will meet with you normally by appointment and give you fair notice of 	I will treat the staff of the Department with dignity and respect and honour the confidentiality of my relationship with the Department.
all such appointments.We will treat you with dignity and respect and honour the confidentiality	 I will provide the Department with all information requested to assess any claim for income support. I will abide by the Declaration in my
of our relationship.	Jobseeker's Allowance or Benefit Application Form.
For and on behalf of the Department of Employment Affairs and Social Protection.	I understand that failure to adhere to my promises above may result in the reduction or withdrawal of any income support payments which would otherwise be due to me and that I could be prosecuted for making a false declaration or withholding

Signed:

Signed:

information in relation to my claim.

Checklist

- Have you answered all questions in the Parts that are relevant to you
- Have you completed Part 2 (if necessary)
- Have you completed Part 3
- Have you attached your spouse/civil partner/co-habitant payslip (if necessary)
- Have you provided your payment details at Section 10
- Have you signed the Declaration in Part 11
- Have you signed the Record of Mutual Commitments (Part 12)
- Letter from school or college (if you are claiming for child(ren) aged between 18 and 22 who are in full-time education)

Note: Taxation

Jobseeker's Benefit

Depending on your circumstances, some or all of your Jobseeker's Benefit payment may be liable to income tax. Tax is not charged on increases paid for any dependent children. Tax is also not charged on the first €13 per week of your payment. The Department pays Jobseeker's Benefit without deducting tax. The Department does, however, notify Revenue of the taxable amount of Jobseeker's Benefit to be taken into account for income tax purposes. This means you do not have to do anything for the correct tax to be paid. Information about the taxation of social welfare payments is available from Revenue and on the Jobs and Pensions page of the Revenue website www.revenue.ie PRSI and USC are not charged on Jobseekers Benefit payments.

Jobseeker's Allowance

Jobseeker's Allowance payments, including increases for dependent adults or children and other Allowances paid with the payment, are fully exempt from income tax, PRSI and USC.

Data Protection Statement

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