



Australian Government  
Family Assistance Office

# Claim for Approved Child Care payments

an annual lump sum payment for the 2008–2009 financial year

## When to use this form

Use this form if you are claiming a lump sum payment of Child Care Benefit for approved child care during the 2008–2009 financial year (1 July 2008–30 June 2009). You need to complete this form to qualify for Child Care Rebate.

Child Care Benefit is a payment to help families with the cost of child care.

Child Care Rebate is an additional payment to Child Care Benefit and covers a percentage of your out-of-pocket child care expenses for approved child care, up to a maximum amount per child per year.

You should have received the booklet **Information Booklet about your claim for Family Assistance** with this form. In this form, this booklet will be referred to as the **Information Booklet**. If you don't have this booklet, call the Family Assistance Office on **13 6150** or go to our website at **www.familyassist.gov.au**

## Online Services

You can claim an annual lump sum payment of Child Care Benefit online at **www.familyassist.gov.au** If you do not wish to claim online, please complete the form and return it to your nearest Family Assistance Office.

## For more information

Go to our website at **www.familyassist.gov.au**, call the Family Assistance Office on **13 6150**, or visit your local **Family Assistance Office**.

To speak to the Family Assistance Office in languages other than English, call **13 1202**.

**Note:** Calls from your home phone to the Family Assistance Office 13 numbers from anywhere in Australia are charged at a fixed rate. That rate may vary from the price of a local call and may also vary between telephone service providers. Calls from public and mobile phones may be timed and charged at a higher rate.

You can return your form to any Family Assistance Office, located in all Medicare offices and Centrelink Customer Service Centres.

## If you have a hearing or speech impairment

**TTY service** Freecall™ **1800 810 586**. A TTY phone is required to use this service.

## Interpreters and translations

If you need an **interpreter** or **translation** of any documents for Family Assistance Office business, we can arrange this for you free of charge.

FA052.1007

### OFFICE USE ONLY / CUSTOMER RECEIPT

Date stamp

Once date stamped by the Family Assistance Office, this receipt is proof that your claim for Child Care Benefit has been lodged.

Customer details

Customer name

CRN

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## What else you will need to provide

This form tells you which **other documents** you need to provide to support your claim. Depending on your circumstances you may have to fill in **other forms**.

## Filling in this form

Please use black or blue pen.

Mark boxes like this  with a ✓ or ✗.

Where you see a box like this  ► **Go to 5** skip the next questions and go to the number shown. You do not need to answer the questions in between.

## Returning your form

To claim for a lump sum payment of Child Care Benefit for the 2008–2009 financial year, you (and your partner) must complete and lodge this form by **30 June 2011**.

Check that you (and your partner) have answered all the questions you need to answer, and that you (and your partner) have signed and dated the form.

If you return required documents (and your claim form):

- by post – we will photocopy your documents and return the originals to you by registered post.
- in person – we will photocopy your documents and return the originals to you.

You can return your form to any Family Assistance Office, located in all Medicare offices and Centrelink Customer Service Centres.

## You

1 Are you claiming online?


No  Go to next question

Yes   Do not complete this form. Go to our website at [www.familyassist.gov.au](http://www.familyassist.gov.au)

2 Please read this before answering the question

If the parent who did not provide their enrolment information or Customer reference number completes this claim there will be delays in your payment of Child Care Benefit. Your child care provider can only submit your child care usage/attendance information to the Family Assistance Office under the details of the parent who provided their enrolment information or Customer Service Number.

Did you provide your enrolment information or Customer Service Number to your child care provider?

No   Do not complete this form, only the parent who provided enrolment information or their Customer Service Number is to complete this claim form.

Yes  Go to next question

3 Do you need an interpreter when dealing with the Family Assistance Office?

This includes an interpreter for people who have a hearing or speech impairment.

No  Go to 5

Yes  Go to next question

4 What is your preferred spoken language?

5 What is your preferred written language?

## Your partner (if you have one)

3 Does your partner need an interpreter when dealing with the Family Assistance Office?

This includes an interpreter for people who have a hearing or speech impairment.

No  Go to 5

Yes  Go to next question

4 What is your partner's preferred spoken language?

5 What is your partner's preferred written language?



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## 6 Please read this before answering the following question

If your employer contributed towards some or all your child care costs, through salary sacrifice or salary packaging, you will need to determine who had the liability for the costs. The issue of liability depends on who is obligated to pay for the child care fees.


If you salary sacrifice the cost of child care fees so that your employer has the legal liability to pay the fees (and not you), you are not eligible for Child Care Benefit as the child care costs are paid under your agreement. Payment of child care fees by an employer is only exempt from fringe benefits tax if the employer is legally liable for the fees. If you are not sure who is legally obliged to pay the fees, you will need to clarify this with your employer.

For more information, see *Who is eligible for Child Care Benefit* in the **Information Booklet**.

Did your employer pay your child care fees during the 2008–2009 financial year?

No   Go to next question

Not sure   Call us on **13 6150** to discuss your eligibility.

Yes   You cannot get Child Care Benefit for this year. Do not continue with this claim.


## 7 Please read this before answering the following question

You may not be eligible for Child Care Benefit if your fees are paid for you by another agency, for example, by the Department of Immigration and Citizenship through the Adult Migrant English Program. However, you may be eligible for Child Care Benefit for care that is not related to your attendance at the Adult Migrant English Program training.


Did another organisation pay your child care fees during the 2008–2009 financial year?


No   Go to next question

Not sure   Call us on **13 6150** to discuss your eligibility.

Yes   You may not get Child Care Benefit for this year. Call us on **13 6150** to check eligibility.

## 8 Did you have a partner on 30 June 2009?

No   When completing the partner's details in this form we are referring to the partner you had on 30 June 2009.

Yes    Go to next question

## You

### 9 Your name

Mr  Mrs  Miss  Ms  Other

Family name

First given name

Second given name

### 10 Have you ever used or been known by any other name (e.g. name at birth, maiden name, previous married name, Aboriginal or tribal name, alias, adoptive name, foster name)?

No  *Go to next question*

Yes  Give details below

#### 1 Other name

Type of name (e.g. name at birth)

#### 2 Other name

Type of name (e.g. maiden name)

If you have more than 2 other names, attach a separate sheet with details.

### 11 Your sex

Male

Female

### 12 Your date of birth

### 13 Your Customer Reference Number (if known)

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## Your partner on 30 June 2009

### 9 Your partner's name

Mr  Mrs  Miss  Ms  Other

Family name

First given name

Second given name

### 10 Has your partner ever used or been known by any other name (e.g. name at birth, maiden name, previous married name, Aboriginal or tribal name, alias, adoptive name, foster name)?

No  *Go to next question*

Yes  Give details below

#### 1 Other name

Type of name (e.g. name at birth)

#### 2 Other name

Type of name (e.g. maiden name)

If your partner has more than 2 other names, attach a separate sheet with details.

### 11 Your partner's sex

Male

Female

### 12 Your partner's date of birth

### 13 Your partner's Customer Reference Number (if known)

 -  -  -



**18** If you had a partner on 30 June 2009, were you in a relationship with them for only part of the 2008–2009 financial year?

No  Go to next question

Yes  Give details below

From

To

**19** Do you give permission for your partner to discuss your payments with us?

You can change this authority at any time.


No

Yes

**20** Do you want another person or organisation to enquire or act on your behalf when dealing with us?

No  Go to next question

Yes

 You will need to complete and attach an **Authorising a person or organisation to enquire or act on your behalf form (SS313)**. If you do not have this form, call us on **13 6150**.

**21 Please read this before answering the following question**

Questions 22 to 26 are optional and will not affect your payment. If you do answer, the information will help us to continue to improve our Electronic Messaging Services.

You can now receive reminders and important information via SMS from the Family Assistance Office.

This service is voluntary and you are able to withdraw from it at any time.

Please read the **Terms and Conditions** for SMS in the **Information Booklet** before you complete the following questions.

**22** Do you wish to receive reminders and important information via Short Message Service (SMS) from the Family Assistance Office?

This service is voluntary and you are able to withdraw from it at any time.

No  Go to next question

Yes  What is your SMS contact number (if different to contact details?)

**OR**

What is your Email address (if different to contact details?)

**23** Do you wish to view some of your Family Assistance Office letters via the Online Letters facility on the Family Assistance Office website?

This service is voluntary and you are able to withdraw from it at any time.

No  Go to 25

Yes  Go to next question

**24** What is your preferred method of notification?

The Family Assistance Office will notify you when you have a letter available for viewing in the Online Letters facility.

**Tick ONE box only**

SMS  SMS contact number (if different to contact details)

Email  Email address (if different to contact details)

**25** Did you answer 'No' to either question 22 or question 23?

No  Go to 27

Yes  Go to next question

**26** What is the reason for not wanting to use this service?

The information will help us to continue to improve services.

Do not trust the internet

Do not have a mobile phone

Do not have the technology

Other  Give reason

## You

- 27** Questions 27 and 28 are optional and will not affect your payment. If you do answer, the information will help us to continue to improve services to Aboriginal, Torres Strait and Australian South Sea Islander peoples.

Are you of Aboriginal or Torres Strait Islander origin?

If you are of both Aboriginal and Torres Strait Islander origin, please tick both 'Yes' boxes.

No

Yes – Aboriginal

Yes – Torres Strait Islander

- 28** Are you of Australian South Sea Islander origin?

No

Yes

## Your partner on 30 June 2009

- 27** Questions 27 and 28 are optional and will not affect your payment. If you do answer, the information will help us to continue to improve services to Aboriginal, Torres Strait and Australian South Sea Islander peoples.

Is your partner of Aboriginal or Torres Strait Islander origin?

If they are of both Aboriginal and Torres Strait Islander origin, please tick both 'Yes' boxes.

No

Yes – Aboriginal

Yes – Torres Strait Islander

- 28** Is your partner of Australian South Sea Islander origin?

No

Yes

### Residence details

- 29 Please read this before answering the question**

**'Permanently'** means you normally live in Australia on a long-term basis. Holidays or short trips outside Australia would not affect this.

Are you living **permanently** in Australia?

No  **Go to next question**

Yes  **Go to 31**

- 30** Are you an Australian Government Sponsored Student?

No

Yes

- 31** Have you lived or travelled outside Australia since 1 September 1994, including short trips and holidays?

The answer to this question may enable the Family Assistance Office to access electronic records held by Australia's immigration department since 1 September 1994. These records will help us to verify your Australian residence on your behalf and assist in processing your claim.

No  **Go to next question**

Yes  **Give details below**

Passport number

Country of issue

- 29 Please read this before answering the question**

**'Permanently'** means your partner normally lives in Australia on a long-term basis. Holidays or short trips outside Australia would not affect this.

Is your partner living **permanently** in Australia?

No  **Go to next question**

Yes  **Go to 31**

- 30** Is your partner an Australian Government Sponsored Student?

No

Yes

- 31** Has your partner lived or travelled outside Australia since 1 September 1994, including short trips and holidays?

The answer to this question may enable the Family Assistance Office to access electronic records held by Australia's immigration department since 1 September 1994. These records will help us to verify your partner's Australian residence on your behalf and assist in processing your claim.

No  **Go to next question**

Yes  **Give details below**

Passport number

Country of issue

**You**

**32** Are you an Australian citizen **who was born in Australia?**

No



You will need to provide proof of your residence status, e.g. **citizenship papers, passport or other documentation**

▶ *Go to next question*

Yes  **Go to 40**

**33** What is your country of birth?

**34** When did you start living in Australia?

**35** Are you an Australian citizen?

No  *Go to next question*

Yes  Date you became an Australian citizen

▶ **Go to 40**

**36** What is your country of citizenship?

New Zealand  *Go to next question*

Other  Give details below

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**37** What type of visa did you arrive on?

New Zealand passport  **Go to 39**  
(Special Category Visa)

Permanent  *Go to next question*

Temporary  *Go to next question*

Unknown (e.g. arrived on mother's/father's passport)  **Go to 39**

**38** Your visa details on arrival

Visa sub class

Date visa granted

**39** Has your visa changed since you arrived in Australia?

No  *Go to next question*

Yes  Current visa details

Visa sub class

Date visa granted

**Your partner on 30 June 2009**

**32** Is your partner an Australian citizen **who was born in Australia?**

No



Your partner will need to provide proof of their residence status, e.g. **citizenship papers, passport or other documentation**

▶ *Go to next question*

Yes  **Go to 41**

**33** What is your partner's country of birth?

**34** When did your partner start living in Australia?

**35** Is your partner an Australian citizen?

No  *Go to next question*

Yes  Date your partner became an Australian citizen

▶ **Go to 41**

**36** What is your partner's country of citizenship?

New Zealand  *Go to next question*

Other  Give details below

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**37** What type of visa did your partner arrive on?

New Zealand passport  **Go to 39**  
(Special Category Visa)

Permanent  *Go to next question*

Temporary  *Go to next question*

Unknown (e.g. arrived on mother's/father's passport)  **Go to 39**

**38** Your partner's visa details on arrival

Visa sub class

Date visa granted

**39** Has your partner's visa changed since they arrived in Australia?

No  *Go to next question*

Yes  Current visa details

Visa sub class

Date visa granted

**40 Please read this before answering the question**

After the end of the financial year when your Lump Sum Claim has been processed, your Child Care Benefit and the Child Care Rebate will be paid into your bank account.

**Note:** If you are currently receiving Family Tax Benefit payments from us and you change your bank account details for your Child Care Benefit, then all Family Tax Benefit payments will be directed to this new account.

Where do you want your payment made?

The bank, building society or credit union account must be in your name. A joint account is acceptable. It cannot be in a child's name unless you are the signatory or trustee.

Name of bank, building society or credit union

Branch where your account is held

Branch number (BSB)

Account number (this may not be your card number)

Account held in the name(s) of

► **Questions continue on page 12**

**This page has been left blank intentionally.**

**41 Please read this before answering the following questions**

Give details for all eligible children who were in your care during the 2008–2009 financial year (1 July 2008–30 June 2009). For more information, see *Eligible Child* in the **Information Booklet**.



You will need to provide proof of birth to claim for any children where proof of birth has not been provided to the Family Assistance Office for family assistance payments.

If you had more than 4 children during the 2008–2009 financial year, photocopy and attach the right hand pages of 13 to 19 before completing the details for child 3 and 4.

**Child 1**

**A** Child's family name

Child's first given name

Child's second given name

**B** Child's sex

Male

Female

**C** Child's date of birth

 /  / 

**D** What is this child's country of birth?

**E** Has this child lived or travelled outside Australia since 1 September 1994, including short trips and holidays?

The answer to this question may enable the Family Assistance Office to access electronic records held by Australia's immigration department since 1 September 1994. These records will help us to verify your child's Australian residence on your behalf and assist in processing your claim.

No  Go to next question

Yes  Give details below

Passport number

Country of issue

**Questions for this child continue on page 14**

**Child 2**

**A** Child's family name

Child's first given name

Child's second given name

**B** Child's sex

Male

Female

**C** Child's date of birth

 /  / 

**D** What is this child's country of birth?

**E** Has this child lived or travelled outside Australia since 1 September 1994, including short trips and holidays?

The answer to this question may enable the Family Assistance Office to access electronic records held by Australia's immigration department since 1 September 1994. These records will help us to verify your child's Australian residence on your behalf and assist in processing your claim.

No  Go to next question

Yes  Give details below

Passport number

Country of issue

**Questions for this child continue on page 14**

**Child 3**

**A** Child's family name

Child's first given name

Child's second given name

**B** Child's sex

Male

Female

**C** Child's date of birth

 /  / 

**D** What is this child's country of birth?

**E** Has this child lived or travelled outside Australia since 1 September 1994, including short trips and holidays?

The answer to this question may enable the Family Assistance Office to access electronic records held by Australia's immigration department since 1 September 1994. These records will help us to verify your child's Australian residence on your behalf and assist in processing your claim.

No  **▶** *Go to next question*

Yes  **▶** *Give details below*

Passport number

Country of issue

**Questions for this child continue on page 15**

**Child 4**

**A** Child's family name

Child's first given name

Child's second given name

**B** Child's sex

Male

Female

**C** Child's date of birth

 /  / 

**D** What is this child's country of birth?

**E** Has this child lived or travelled outside Australia since 1 September 1994, including short trips and holidays?

The answer to this question may enable the Family Assistance Office to access electronic records held by Australia's immigration department since 1 September 1994. These records will help us to verify your child's Australian residence on your behalf and assist in processing your claim.

No  **▶** *Go to next question*

Yes  **▶** *Give details below*

Passport number

Country of issue

**Questions for this child continue on page 15**

**Child 1****F** Your relationship to this child

The term 'parent' refers to a natural parent or an adoptive parent or a person who is legally responsible for a child born through an artificial conception procedure or where a surrogacy court order is in place.

**Tick one box only**

- Parent   
 Grandparent   
 Step-parent   
 Foster carer   
 Other  Give details below

**G** Did this child attend school during the 2008–2009 financial year?

Please read *Details of your children in approved child care* in the **Information Booklet** before you answer this question.

No  You may be contacted for more information.  
**Go to i for this child**

Yes  Go to next question

**H** Did this child attend school for the first time during the 2008–2009 financial year?

No  Go to next question

Yes  Date started

 /  / 
**i** Are you or your partner (or ex-partner) the grandparent of this child?

More information may be required to confirm whether you are eligible for additional assistance, as a grandparent. For more information, see *Who is eligible for Child Care Benefit?* in the **Information Booklet**.

No  **Go to J for this child**

Yes  When did this child enter your care?

 /  / 

**Questions for this child continue on page 16**

**Child 2****F** Your relationship to this child

The term 'parent' refers to a natural parent or an adoptive parent or a person who is legally responsible for a child born through an artificial conception procedure or where a surrogacy court order is in place.

**Tick one box only**

- Parent   
 Grandparent   
 Step-parent   
 Foster carer   
 Other  Give details below

**G** Did this child attend school during the 2008–2009 financial year?

Please read *Details of your children in approved child care* in the **Information Booklet** before you answer this question.

No  You may be contacted for more information.  
**Go to i for this child**

Yes  Go to next question

**H** Did this child attend school for the first time during the 2008–2009 financial year?

No  Go to next question

Yes  Date started

 /  / 
**i** Are you or your partner (or ex-partner) the grandparent of this child?

More information may be required to confirm whether you are eligible for additional assistance, as a grandparent. For more information, see *Who is eligible for Child Care Benefit?* in the **Information Booklet**.

No  **Go to J for this child**

Yes  When did this child enter your care?

 /  / 

**Questions for this child continue on page 16**

**Child 3****F** Your relationship to this child

The term 'parent' refers to a natural parent or an adoptive parent or a person who is legally responsible for a child born through an artificial conception procedure or where a surrogacy court order is in place.

**Tick one box only**

- Parent   
 Grandparent   
 Step-parent   
 Foster carer   
 Other  Give details below

**G** Did this child attend school during the 2008–2009 financial year?

Please read *Details of your children in approved child care* in the **Information Booklet** before you answer this question.

No  You may be contacted for more information.  
**Go to i for this child**

Yes  *Go to next question*

**H** Did this child attend school for the first time during the 2008–2009 financial year?

No  *Go to next question*

Yes  Date started

 /  / 
**i** Are you or your partner (or ex-partner) the grandparent of this child?

More information may be required to confirm whether you are eligible for additional assistance, as a grandparent. For more information, see *Who is eligible for Child Care Benefit?* in the **Information Booklet**.

No  **Go to J for this child**

Yes  When did this child enter your care?

 /  / 

**Questions for this child continue on page 17**

**Child 4****F** Your relationship to this child

The term 'parent' refers to a natural parent or an adoptive parent or a person who is legally responsible for a child born through an artificial conception procedure or where a surrogacy court order is in place.

**Tick one box only**

- Parent   
 Grandparent   
 Step-parent   
 Foster carer   
 Other  Give details below

**G** Did this child attend school during the 2008–2009 financial year?

Please read *Details of your children in approved child care* in the **Information Booklet** before you answer this question.

No  You may be contacted for more information.  
**Go to i for this child**

Yes  *Go to next question*

**H** Did this child attend school for the first time during the 2008–2009 financial year?

No  *Go to next question*

Yes  Date started

 /  / 
**i** Are you or your partner (or ex-partner) the grandparent of this child?

More information may be required to confirm whether you are eligible for additional assistance, as a grandparent. For more information, see *Who is eligible for Child Care Benefit?* in the **Information Booklet**.

No  **Go to J for this child**

Yes  When did this child enter your care?

 /  / 

**Questions for this child continue on page 17**

**Child 1**

- J** Did this child spend time, with someone other than you (and/or your partner) at 30 June 2009 (such as one of their parents) during the 2008–2009 financial year (e.g. weekends, school holidays)?

For more information, see *Who is eligible for Child Care Benefit?* in the **Information Booklet**.

No  **Go to M for this child**

Yes  Who did the child spend time with?

Name

Address


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Postcode

- K** Did you have a parenting plan or court order for the period during the 2008–2009 financial year?

No  *Go to next question*

Yes   Please attach a copy of the parenting plan or court order, if you have not already done so.

**Go to M**

- L** What percentage of care did you have for the 2008–2009 financial year?

 %

**OR**

How many nights was the child in your care during the 2008–2009 financial year?

From

 /  / 

To

 /  / 

- M** Is this child under seven years of age?

No  **Go to 42**

Yes  *Go to next question*

**Questions for this child continue on page 18**

**Child 2**

- J** Did this child spend time, with someone other than you (and/or your partner) at 30 June 2009 (such as one of their parents) during the 2008–2009 financial year (e.g. weekends, school holidays)?

For more information, see *Who is eligible for Child Care Benefit?* in the **Information Booklet**.

No  **Go to M for this child**

Yes  Who did the child spend time with?

Name

Address


---



---

Postcode

- K** Did you have a parenting plan or court order for the period during the 2008–2009 financial year?

No  *Go to next question*

Yes   Please attach a copy of the parenting plan or court order, if you have not already done so.

**Go to M**

- L** What percentage of care did you have for the 2008–2009 financial year?

 %

**OR**

How many nights was the child in your care during the 2008–2009 financial year?

From

 /  / 

To

 /  / 

- M** Is this child under seven years of age?

No  **Go to 42**

Yes  *Go to next question*

**Questions for this child continue on page 18**

**Child 3**

**J** Did this child spend time, with someone other than you (and/or your partner) at 30 June 2009 (such as one of their parents) during the 2008–2009 financial year (e.g. weekends, school holidays)?

For more information, see *Who is eligible for Child Care Benefit?* in the **Information Booklet**.

No  **Go to M for this child**

Yes  Who did the child spend time with?

Name

Address

Postcode

**K** Did you have a parenting plan or court order for the period during the 2008–2009 financial year?

No  *Go to next question*

Yes  Please attach a copy of the parenting plan or court order, if you have not already done so.  
**Go to M**

**L** What percentage of care did you have for the 2008–2009 financial year?

 %

**OR**

How many nights was the child in your care during the 2008–2009 financial year?

From

 / /

To

 / /

**M** Is this child under seven years of age?

No  **Go to 42**

Yes  *Go to next question*

**Questions for this child continue on page 19**

**Child 4**

**J** Did this child spend time, with someone other than you (and/or your partner) at 30 June 2009 (such as one of their parents) during the 2008–2009 financial year (e.g. weekends, school holidays)?

For more information, see *Who is eligible for Child Care Benefit?* in the **Information Booklet**.

No  **Go to M for this child**

Yes  Who did the child spend time with?

Name

Address

Postcode

**K** Did you have a parenting plan or court order for the period during the 2008–2009 financial year?

No  *Go to next question*

Yes  Please attach a copy of the parenting plan or court order, if you have not already done so.  
**Go to M**

**L** What percentage of care did you have for the 2008–2009 financial year?

 %

**OR**

How many nights was the child in your care during the 2008–2009 financial year?

From

 / /

To

 / /

**M** Is this child under seven years of age?

No  **Go to 42**

Yes  *Go to next question*

**Questions for this child continue on page 19**

**Child 1**

**N Please read this before answering the question**

To claim Child Care Benefit for a child who is under seven years of age, you need to prove that your child's immunisation is up-to-date or that you have an approved exemption for that child.

The easiest way to do this is to provide details of the current Medicare card your child is listed on.

For more information, see *Immunisation details* in the **Information Booklet**.


Have you already provided this child's current Medicare card details to the Family Assistance Office?

No  Go to next question

Yes  Go to 42

**O Can you provide details of the current Medicare card that this child is listed on, so that we can check their immunisation status?**

For more information, see *Immunisation details* in the **Information Booklet**.

No   We need you to provide your Medicare card number OR one of the documents below that confirms this child's immunisation is up-to-date, or that they have an approved exemption.

**Your child's Personal Health Record is NOT acceptable proof of immunisation for Child Care Benefit purposes.**

*Tick whichever applies*

My child is not yet listed on a Medicare card. I will provide the card number when it has been issued.

An Immunisation History Statement from the Australian Childhood Immunisation Register (ACIR)

An Immunisation History form from a doctor or recognised immunisation provider

A letter from a doctor or recognised immunisation provider

A Medical Contraindication form from a doctor or recognised immunisation provider

A Conscientious Objection form from a doctor or recognised immunisation provider

A letter from an official of the Church of Christ, Scientist stating that you and/or your partner are practising members of this church

Yes  Medicare card number

-       -

Child's Medicare reference number

Reference Number	First given name and second initial

**This is the end of questions for this child**

**Child 2**

**N Please read this before answering the question**

To claim Child Care Benefit for a child who is under seven years of age, you need to prove that your child's immunisation is up-to-date or that you have an approved exemption for that child.

The easiest way to do this is to provide details of the current Medicare card your child is listed on.

For more information, see *Immunisation details* in the **Information Booklet**.


Have you already provided this child's current Medicare card details to the Family Assistance Office?

No  Go to next question

Yes  Go to 42

**O Can you provide details of the current Medicare card that this child is listed on, so that we can check their immunisation status?**

For more information, see *Immunisation details* in the **Information Booklet**.

No   We need you to provide your Medicare card number OR one of the documents below that confirms this child's immunisation is up-to-date, or that they have an approved exemption.

**Your child's Personal Health Record is NOT acceptable proof of immunisation for Child Care Benefit purposes.**

*Tick whichever applies*

My child is not yet listed on a Medicare card. I will provide the card number when it has been issued.

An Immunisation History Statement from the Australian Childhood Immunisation Register (ACIR)

An Immunisation History form from a doctor or recognised immunisation provider

A letter from a doctor or recognised immunisation provider

A Medical Contraindication form from a doctor or recognised immunisation provider

A Conscientious Objection form from a doctor or recognised immunisation provider

A letter from an official of the Church of Christ, Scientist stating that you and/or your partner are practising members of this church

Yes  Medicare card number

-       -

Child's Medicare reference number

Reference Number	First given name and second initial

**This is the end of questions for this child**

**Child 3**

**N Please read this before answering the question**

To claim Child Care Benefit for a child who is under seven years of age, you need to prove that your child's immunisation is up-to-date or that you have an approved exemption for that child.

The easiest way to do this is to provide details of the current Medicare card your child is listed on.

For more information, see *Immunisation details* in the **Information Booklet**.


Have you already provided this child's current Medicare card details to the Family Assistance Office?

No  Go to next question

Yes  Go to 42

**O Can you provide details of the current Medicare card that this child is listed on, so that we can check their immunisation status?**

For more information, see *Immunisation details* in the **Information Booklet**.

No   We need you to provide your Medicare card number OR one of the documents below that confirms this child's immunisation is up-to-date, or that they have an approved exemption.

**Your child's Personal Health Record is NOT acceptable proof of immunisation for Child Care Benefit purposes.**

*Tick whichever applies*

My child is not yet listed on a Medicare card. I will provide the card number when it has been issued.

An Immunisation History Statement from the Australian Childhood Immunisation Register (ACIR)

An Immunisation History form from a doctor or recognised immunisation provider

A letter from a doctor or recognised immunisation provider

A Medical Contraindication form from a doctor or recognised immunisation provider

A Conscientious Objection form from a doctor or recognised immunisation provider

A letter from an official of the Church of Christ, Scientist stating that you and/or your partner are practising members of this church

Yes  Medicare card number

-       -

Child's Medicare reference number

Reference Number	First given name and second initial

**This is the end of questions for this child**

**Child 4**

**N Please read this before answering the question**

To claim Child Care Benefit for a child who is under seven years of age, you need to prove that your child's immunisation is up-to-date or that you have an approved exemption for that child.

The easiest way to do this is to provide details of the current Medicare card your child is listed on.

For more information, see *Immunisation details* in the **Information Booklet**.


Have you already provided this child's current Medicare card details to the Family Assistance Office?

No  Go to next question

Yes  Go to 42

**O Can you provide details of the current Medicare card that this child is listed on, so that we can check their immunisation status?**

For more information, see *Immunisation details* in the **Information Booklet**.

No   We need you to provide your Medicare card number OR one of the documents below that confirms this child's immunisation is up-to-date, or that they have an approved exemption.

**Your child's Personal Health Record is NOT acceptable proof of immunisation for Child Care Benefit purposes.**

*Tick whichever applies*

My child is not yet listed on a Medicare card. I will provide the card number when it has been issued.

An Immunisation History Statement from the Australian Childhood Immunisation Register (ACIR)

An Immunisation History form from a doctor or recognised immunisation provider

A letter from a doctor or recognised immunisation provider

A Medical Contraindication form from a doctor or recognised immunisation provider

A Conscientious Objection form from a doctor or recognised immunisation provider

A letter from an official of the Church of Christ, Scientist stating that you and/or your partner are practising members of this church

Yes  Medicare card number

-       -

Child's Medicare reference number

Reference Number	First given name and second initial

**This is the end of questions for this child**

**42** Give the following child care service details for each of your children in **approved** child care used during the 2008–2009 financial year.

You must complete a separate answer block for each child care service.

If you used **family day care** or **in home care**, give details of the coordinating service, not the individual carer.

**Service ID number—Your child care service will be able to tell you their Service ID Number.**



If you had more than 4 children in **approved** child care or if any of your children attend more than 3 **approved** child care services, photocopy and attach pages 20 to 21 before completing the details.

**Child 1**

Child's first given name

**1** Full name of **child care service**

Service ID number  
*(see note above)*

Address


Postcode

Start date

 /  / 

End date

 /  / 

**Child 2**

Child's first given name

**1** Full name of **child care service** (if different to Child 1)

Service ID number  
*(see note above)*

Address


Postcode

Start date

 /  / 

End date

 /  / 

**2** Full name of **child care service**

Service ID number  
*(see note above)*

Address


Postcode

Start date

 /  / 

End date

 /  / 

**2** Full name of **child care service** (if different to Child 1)

Service ID number  
*(see note above)*

Address


Postcode

Start date

 /  / 

End date

 /  / 

**3** Full name of **child care service**

Service ID number  
*(see note above)*

Address


Postcode

Start date

 /  / 

End date

 /  / 

**3** Full name of **child care service** (if different to Child 1)

Service ID number  
*(see note above)*

Address


Postcode

Start date

 /  / 

End date

 /  /

**Child 3**

Child's first given name

**1** Full name of **child care service**

Service ID number  
*(see note above)*

Address

Postcode

Start date

End date

**2** Full name of **child care service**

Service ID number  
*(see note above)*

Address

Postcode

Start date

End date

**3** Full name of **child care service**

Service ID number  
*(see note above)*

Address

Postcode

Start date

End date

**Child 4**

Child's first given name

**1** Full name of **child care service** (if different to Child 1)

Service ID number  
*(see note above)*

Address

Postcode

Start date

End date

**2** Full name of **child care service** (if different to Child 1)

Service ID number  
*(see note above)*

Address

Postcode

Start date

End date

**3** Full name of **child care service** (if different to Child 1)

Service ID number  
*(see note above)*

Address

Postcode

Start date

End date

**You**

- 43** During the periods that your child/ren attended approved child care, did any of the following activities apply to **you**?

**Tick all that apply to you**

Working

Looking for work

Studying or training

Caring for an adult or child with a disability

Doing voluntary work

Paid or unpaid parental leave  Date leave commenced  
 /  /

Have a disability

Absent from Australia

In prison

None of these apply

- 44** Did you participate in any of the activities in question 43 for **at least** 15 hours per week (or 30 hours per fortnight)?

Time spent in work related activities can be combined to answer this question, however restrictions to voluntary work may apply.

For more information, see *Eligible Child Care Benefit hours* in the **Information Booklet**.

No  **Go to next question**

Yes  **Go to 46**

- 45** Did you participate in any of the activities in question 43 for **less than** 15 hours per week (or 30 hours per fortnight)?

Time spent in work related activities can be combined to answer this question, however restrictions to voluntary work may apply.

For more information, see *Eligible Child Care Rebate hours* in the **Information Booklet**.

No

Yes

**Your partner on 30 June 2009**

- 43** During the periods that your child/ren attended approved child care, did any of the following activities apply to **your partner**?

**Tick all that apply to your partner**

Working

Looking for work

Studying or training

Caring for an adult or child with a disability

Doing voluntary work

Paid or unpaid parental leave  Date leave commenced  
 /  /

Have a disability

Absent from Australia

In prison

None of these apply

- 44** Did your partner participate in any of the activities in question 43 for **at least** 15 hours per week (or 30 hours per fortnight)?

Time spent in work related activities can be combined to answer this question, however restrictions to voluntary work may apply.

For more information, see *Eligible Child Care Benefit hours* in the **Information Booklet**.

No  **Go to next question**

Yes  **Go to 46**

- 45** Did your partner participate in any of the activities in question 43 for **less than** 15 hours per week (or 30 hours per fortnight)?

Time spent in work related activities can be combined to answer this question, however restrictions to voluntary work may apply.

For more information, see *Eligible Child Care Rebate hours* in the **Information Booklet**.

No

Yes

**You**

**46** Were there any periods when your children attended approved care that none of these activities applied to **you**?

No  *Go to next question*

Yes  Give the periods that your children attended approved care when the activities did **NOT** apply to **you**.

From	To
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /

If you need to give more dates, attach a separate sheet with details.

**Your partner on 30 June 2009**

**46** Were there any periods when your children attended approved care that none of these activities applied to **your partner**?

No  *Go to next question*

Yes  Give the periods that your children attended approved care when the activities did **NOT** apply to **your partner**.

From	To
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /
/ /	/ /

If your partner needs to give more dates, attach a separate sheet with details.

Additional assistance

**47 Please read this before answering the following questions**

Apart from Child Care Benefit, there are other payments or assistance that families may be entitled to receive.

If your child has a disability

Call Centrelink on **13 2717** to discuss *Carer Allowance* and/or *Carer Payment* or go to the website at **www.centrelink.gov.au**

If your child is an orphan

Call Centrelink on **13 6150** to discuss *Double Orphan Pension* or go to the website **www.centrelink.gov.au**  
For more information and Centrelink's definition of an orphan, see *Double Orphan Pension* in the **Information Booklet**.

Your rate

**48 Please read this before answering the question.**

The rate of Child Care Benefit you will be entitled to is based on your actual annual family income. Your income will affect the amount of Child Care Benefit you can receive. You will not receive any Child Care Benefit if your income is more than the limits in the following table.

1 child using child care	\$126,793
2 children using child care	\$131,457
3 children using child care	\$148,452

add \$28,028 for each additional child using child care

If you know your income is too high, you will still need to complete this claim form for Child Care Benefit and be assessed at the zero rate of Child Care Benefit to be eligible for Child Care Rebate. One of the eligibility requirements for Child Care Rebate is to be eligible for Child Care Benefit, this includes zero rate customers.

For more information, see *Payment options to reduce your risk of an overpayment of Child Care Benefit* in the **Information Booklet**.

For the period during the 2008–2009 financial year, what rate of Child Care Benefit do you want to be assessed for?

Zero rate  **Do not answer questions 49 to 77. Go to 78**  
of Child Care Benefit only

More than zero rate  You will need to lodge a tax return or advise that you are not required to lodge a tax return.  
of Child Care Benefit  
**Go to next question**

**49 Do you currently receive Family Tax Benefit fortnightly?**

No  **Go to 51**

Yes  **Go to next question**

**50 Have your income details changed since you last updated your estimate with the Family Assistance Office?**

No  **Do not answer questions 51 to 55. Go to 56**

Yes  **Go to next question**

**You**

**51** Did you get any payments from the Department of Veterans' Affairs in the 2008–2009 financial year?

No  Go to next question

Yes  Give details below

Type of payment

Service Pension

Income Support Supplement

Age pension

Other  Give details below

Text input box for details

Department of Veterans' Affairs reference number

Text input box for reference number

Fortnightly amount

\$ [ ]

When did you start to receive this payment

[ ] / [ ] / [ ]

Has this payment stopped?

No

Yes  When did this payment stop

[ ] / [ ] / [ ]

**52** Please read this before answering the following questions

If you need to lodge a tax return for the 2008–2009 financial year and have not done so, the Family Assistance Office cannot assess your Child Care Benefit until your taxable income details are confirmed by the Australian Taxation Office.

Have you lodged a tax return for the 2008–2009 financial year?

No  Go to 54

Yes  Go to next question

**53** Have you received your Taxation Notice of Assessment?

No  Go to 55

Yes  What was your taxable income on your Taxation Notice of Assessment?

\$ [ ]

Go to 55

**54** Will you lodge a tax return for the 2008–2009 financial year?

No  Why won't you be lodging a tax return for the 2008–2009 financial year?

Text input box for explanation

Yes  Go to next question

**Your partner on 30 June 2009**

**51** Did your partner get any payments from the Department of Veterans' Affairs in the 2008–2009 financial year?

No  Go to next question

Yes  Give details below

Type of payment

Service Pension

Income Support Supplement

Age pension

Other  Give details below

Text input box for details

Department of Veterans' Affairs reference number

Text input box for reference number

Fortnightly amount

\$ [ ]

When did your partner start to receive this payment

[ ] / [ ] / [ ]

Has this payment stopped?

No

Yes  When did this payment stop

[ ] / [ ] / [ ]

**52** Please read this before answering the following questions

If your partner needs to lodge a tax return for the 2008–2009 financial year and have not done so, the Family Assistance Office cannot assess your Child Care Benefit until their taxable income details are confirmed by the Australian Taxation Office.

Has your partner lodged a tax return for the 2008–2009 financial year?

No  Go to 54

Yes  Go to next question

**53** Has your partner received their Taxation Notice of Assessment?

No  Go to 55

Yes  What was their taxable income on their Taxation Notice of Assessment?

\$ [ ]

Go to 55

**54** Will your partner lodge a tax return for the 2008–2009 financial year?

No  Why won't they be lodging a tax return for the 2008–2009 financial year?

Text input box for explanation

Yes  Go to next question

**55 Please read this before answering the following questions**

Taxable income is the amount remaining after you take away all your allowable deductions from your assessable or gross income. Even if you do not expect to lodge a tax return for the 2008–2009 financial year, any income you earned in the financial year is still considered taxable income and you should include it in your estimate.

**All overpayments need to be paid back.** Overpayments of Child Care Benefit may be recovered from your future family assistance payments and from tax refunds.

For more information, see *Estimating your actual annual family income* in the **Information Booklet**.

**Use the following table to estimate your (and/or your partner's) taxable income for 1 July 2008 to 30 June 2009.**

**Note:** If you did not receive income from any of the following sources, please write **\$0** in the appropriate boxes.

		You	Your partner
<b>A</b>	<b>Estimated taxable income from salary and wages</b> <i>Include overtime payments, pay rises and bonuses.</i>	\$	\$
<b>B</b>	<b>Estimated taxable income from lump sum payments</b> <i>Include termination and redundancy payments.</i>	\$	\$
<b>C</b>	<b>Estimated taxable income from business or self-employment</b> <i>Include taxable income from sole trading and distributions from partnerships, trusts and companies.</i> <i>You may need to refer to your profit and loss statements.</i>	Profit or Loss	
		\$	\$
		-\$	-\$
<b>D</b>	<b>Estimated taxable income from investments</b> <i>Include income from banks, credit unions, building societies, dividends from shares, income from managed investments.</i>	Profit	\$
		\$	\$
<b>E</b>	<b>Estimated taxable income from real estate</b> <i>Include taxable income from all residential or commercial real estate for which you (or your partner) receive rent. This can include houses, a room in your house, units, pasture and boats.</i> <b>If you made a loss, make sure you subtract this from your total estimated income and make sure you also answer question 56(C) – ‘Total net rental property losses’.</b>	Profit or Loss	
		\$	\$
		-\$	-\$
<b>F</b>	<b>Estimated taxable income from government pensions or benefits</b> <i>You must include any amount you received from payments such as Newstart Allowance, Parenting Payment, Age Pension, Austudy, Disability Support Pension of Age Pension age or Disability Support Pension (Blind) of Age Pension age, Farm Help, Department of Veterans’ Affairs payments, including taxable Defence Force Income Support Supplement, Special Benefit and the taxable components of ABSTUDY or Youth Allowance you receive for yourself</i>	\$	\$
<b>G</b>	<b>Other estimated taxable income</b> <i>For example, superannuation withdrawals, scholarships, capital gains or foreign income on which you pay Australian tax.</i>	AUD	AUD
		AUD	AUD
	<b>Total estimated taxable income (total of A to G)</b>	= \$	\$
		\$	\$

Provide details of how much you (and/or your partner) expect to receive from any of the following sources in the 2008–2009 financial year.

**Note:** If you do not receive income from any of the following sources, please write **\$0** in the appropriate boxes.

For more information, see *Estimating your actual family income* in the **Notes Booklet**.

	You	Your partner
<p><b>A Reportable fringe benefits</b></p> <p><i>A reportable fringe benefit provided by your (and/or your partner's) employer is counted as part of your family's income.</i></p>	<p><i>Estimated amount</i></p> <p>\$ <input type="text"/></p>	<p><i>Estimated amount</i></p> <p>\$ <input type="text"/></p>
<p><b>C Total net rental property losses</b></p> <p><i>Provide details of any net rental property losses regardless of whether you (or your partner) intend to lodge a tax return for the 2008–2009 financial year.</i></p> <p><b>If you entered a net loss for your taxable income from real estate at question 55(E), you should copy the amount of the loss here.</b></p>	<p><i>Estimated amount</i></p> <p>–\$ <input type="text"/></p>	<p><i>Estimated amount</i></p> <p>–\$ <input type="text"/></p>
<p><b>D Tax free pensions and benefits</b></p> <p><i>Any tax free pensions and benefits you received from Centrelink or the Department of Veterans' Affairs in the 2008–2009 financial year will be counted as part of your family's income.</i></p> <p><b>Income from tax free pensions and benefits is included in your adjusted taxable income for family assistance purposes.</b></p>	<p><i>Estimated amount</i></p> <p>\$ <input type="text"/></p>	<p><i>Estimated amount</i></p> <p>\$ <input type="text"/></p>
<p><b>E Foreign income</b></p> <p><i>Any income earned, derived or received from sources <b>outside Australia</b> for which you do not have to pay Australian income tax is counted as income.</i></p> <p><i>Do not include any foreign income amount you have already included in question 55(G).</i></p> <p><b>The exchange value of any foreign income is included in your adjusted taxable income for family assistance purposes.</b></p>	<p><i>Estimated amount</i></p> <p>AUD <input type="text"/></p>	<p><i>Estimated amount</i></p> <p>AUD <input type="text"/></p>
<p><b>F Tax exempt foreign income</b></p> <p><i>Any income for qualifying service on a particular approved project (under section 23AF of the Income Tax Assessment Act 1936) and/or foreign service (under section 23AG of the Income Tax Assessment Act 1936) for a continuous period of 91 days or more. If you receive this type of income, it will be recorded on your payment summary.</i></p> <p><i>Do not include any foreign income amount you have already included in question 55(G).</i></p>	<p><i>Estimated amount</i></p> <p>AUD <input type="text"/></p>	<p><i>Estimated amount</i></p> <p>AUD <input type="text"/></p>
<p><b>G Child support PAID</b></p> <p><i>Types of child support include: private child support, child support you <b>PAY</b> through the Child Support Agency, non-cash child support, any other amounts.</i></p> <p><i>You should keep proof of child support you <b>PAY</b> as you may be asked to show evidence of this amount.</i></p> <p>Provide details of how much you (and/or your partner) expect to <b>PAY</b> in child support in the 2008–2009 financial year.</p> <p><b>Note:</b> The full amount of any child support you pay will be deducted from your estimated income.</p>	<p><i>Estimated amount</i></p> <p>\$ <input type="text"/></p>	<p><i>Estimated amount</i></p> <p>\$ <input type="text"/></p>

**57 Please read this before answering the questions**

You are not breaking the law if you do not give us your tax file number, but if you do not provide it, or authorise us to get it from the Australian Taxation Office, your entitlement to Child Care Benefit is limited to the zero rate.

Have you (and/or your partner) given us your tax file number before?

No  Go to next question

Not sure  Go to next question

Yes  **Go to 59**

**58 Do you (and/or your partner) have a tax file number?**

**You**

No  Please call us on **13 6150**.

Yes  Your tax file number

-  -

**Your Partner**

No  Please call us on **13 6150**.

Yes  Your partner's tax file number

-  -

Returning to work

**59 Did you have a partner at any time during the 2008–2009 financial year?**

For more information, see *Returning to work* in the **Information Booklet**

No  Single parents do not need to apply for this extra assistance.

**Go to 61**

Yes  Go to next question

**60 Did you (or your partner) return to work for the FIRST time after the birth of a baby or after a period out of the workforce to care for a child who came into your care?**

No  You are not entitled to this extra assistance.

Go to next question

Yes  Go to next question

Int

**61 During the 2008–2009 financial year, were you in a relationship with someone other than the partner you had on 30 June 2009?**

No  **Do not answer questions 62 to 77. Go to 78**

Yes  Go to next question

**62 Please read this before answering the following questions**

To help calculate your lump sum payment, we need you to provide details of any partners you had during the 2008–2009 financial year, other than your partner on 30 June 2009. These partners are called 'previous partner(s)'.

If you would like assistance to complete this section, call us on **13 6150**.

The following questions will ask you about 2 previous partners. If you had **more than 2 previous partners in the 2008–2009 financial year**, photocopy and attach pages 29 to 31 before completing the details.

**Details of PREVIOUS PARTNER 1 in the 2008–2009 financial year**

**63 Name of previous partner 1**

Mr  Mrs  Miss  Ms  Other

Family name

First given name

Second given name

**64 Has this previous partner ever used or been known by any other name (e.g. name at birth, maiden name, previous married name, Aboriginal or tribal name, alias, adoptive name, foster name)?**

No  **Go to next question**

Yes  **Give details**

**1 Other name**

Type of name (e.g. name at birth)

**2 Other name**

Type of name (e.g. maiden name)

If this previous partner has more than 2 other names, attach a separate sheet with details.

**65 This previous partner's sex**

Male

Female

**Details of PREVIOUS PARTNER 2 in the 2008–2009 financial year**

**63 Name of previous partner 2**

Mr  Mrs  Miss  Ms  Other

Family name

First given name

Second given name

**64 Has this previous partner ever used or been known by any other name (e.g. name at birth, maiden name, previous married name, Aboriginal or tribal name, alias, adoptive name, foster name)?**

No  **Go to next question**

Yes  **Give details**

**1 Other name**

Type of name (e.g. name at birth)

**2 Other name**

Type of name (e.g. maiden name)

If this previous partner has more than 2 other names, attach a separate sheet with details.

**65 This previous partner's sex**

Male

Female



**Details of PREVIOUS PARTNER 1 in the 2008–2009 financial year**

**73** Did this previous partner get any reportable fringe benefits in the 2008–2009 financial year?

No

Yes  *Estimated amount*

\$

**74** Did this previous partner have any net rental property losses in the 2008–2009 financial year?

No

Yes  *Estimated amount*

– \$

**75** Did this previous partner get any tax free pensions or benefits in the 2008–2009 financial year?

No

Yes  *Estimated amount*

\$

**76** Did this previous partner get any foreign income in the 2008–2009 financial year?

No

Yes  *Estimated amount*

AUD

**77** Did this previous partner **PAY** child support in the 2008–2009 financial year?

No

Yes  *Estimated amount*

\$

**Details of PREVIOUS PARTNER 2 in the 2008–2009 financial year**

**73** Did this previous partner get any reportable fringe benefits in the 2008–2009 financial year?

No

Yes  *Estimated amount*

\$

**74** Did this previous partner have any net rental property losses in the 2008–2009 financial year?

No

Yes  *Estimated amount*

– \$

**75** Did this previous partner get any tax free pensions or benefits in the 2008–2009 financial year?

No

Yes  *Estimated amount*

\$

**76** Did this previous partner get any foreign income in the 2008–2009 financial year?

No

Yes  *Estimated amount*

AUD

**77** Did this previous partner **PAY** child support in the 2008–2009 financial year?

No

Yes  *Estimated amount*

\$

**78 Please read this before answering the following question**

At certain questions on this form, you may have been asked to attach documents. In the following list, tick the box next to each document you are providing. Please provide original documentation. The documents will be returned to you by registered post or you can have them photocopied at your nearest Family Assistance Office.

Which of the following forms, documents and other attachments are you providing with this form?

<p><b>Personal details</b>  <i>Authorising a person or organisation to enquire or act on your behalf form (SS313)</i>  <i>(if you answered Yes at Question 20)</i></p>	<b>You</b>			
<input type="checkbox"/>	<input type="checkbox"/>			
<p><b>Australian residence</b>                  Citizenship papers, passport or other documents  <i>(if you answered No at Question 32)</i></p>	<b>You</b>	<b>Your partner</b>		
	<input type="checkbox"/>	<input type="checkbox"/>		
<p><b>Child details</b> (if not previously provided to the Family Assistance Office for family assistance payments) <i>See Questions 41 A–O Tick one box for each child</i></p>	<b>Child 1</b>	<b>Child 2</b>	<b>Child 3</b>	<b>Child 4</b>
Birth Certificate or extract	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adoption papers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other government issued document (e.g. parenting plan or court order)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>If a child came into your care from someone else during the 2008–2009 financial year</b>                  A copy of legal or other documents supporting the change of care</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>If you shared the care of a child with a person other than your current partner</b>                  A copy of the parenting plan or court order</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>Immunisation details</b> (for children under seven years of age)  <i>See Questions 41 O Tick one box for each child under seven years of age</i></p>				
I have already provided the current Medicare card number the child is listed on, to the Family Assistance Office.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I will provide the current Medicare card number the child will be listed on, to the Family Assistance Office, when it is issued.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I will provide documents that confirms each child's immunisation is up-to-date, or that they have an approved exemption.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have given this information/document to the Family Assistance Office before and it may be used for this claim.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Statement

**79 Statement**

**I declare that:**

- the information provided in this form is complete and correct.
- I have received the **Information Booklet**, which includes the privacy notice.

**I understand that:**

- giving false or misleading information is a serious offence.
- the Family Assistance Office can make relevant enquiries to ensure I receive my correct entitlement.
- any overpayment of Child Care Benefit will need to be paid back and that some or all of an overpayment may be recovered from my tax refund and/or future family assistance payments.

Your signature

Date  /  /

Your partner's (on 30 June 2009) signature (if applicable)

Date  /  /