



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.

1. Please state:

- Personal Public Service Number (**PPS number**) **same** as RSI/Tax Number:

Applicant									Spouse, Civil Partner or Cohabitant								
FIGURES							LETTER(S)		FIGURES							LETTER(S)	
1	2	3	4	5	6	7	A		1	2	3	4	5	6	7	B	

- First name(s):

MAUREEN	SEAN
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- Surname:

MURPHY	MURPHY
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- Birth Surname if different:

LYNCH	
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- Mother's Birth Surname:

MCDERMOTT	FITZPATRICK
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- Address
(If you and your spouse, civil partner or cohabitant are not living together give both Addresses):

1 NEW STREET, OLD TOWN, DONEGAL TOWN, DONEGAL	1 NEW STREET, OLD TOWN, DONEGAL TOWN, DONEGAL
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- Postcode:

A65F4E2	A65F4E2
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- Telephone/Mobile Number:

0871234567

- Email address:

EXAMPLE@mail.com

- Nationality:

IRISH	IRISH
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- Normal occupation:

BUILDER

- Date of Birth:

2	8	0	2	1	9	7	0
D	D	M	M	Y	Y	Y	Y

SAMPLE



Jobseeker's Allowance or Benefit

- Please complete in Black Pen.
- Please use BLOCK LETTERS.

Part 1

PERSONAL DETAILS about you and your spouse, civil partner or cohabitant: (If you do not wish to claim for a spouse, civil partner or cohabitant you do not need to list his/her details below or complete Section 6 of this form for Jobseeker's Benefit).

	Applicant								Spouse, Civil partner or Cohabitant							
	FIGURES				LETTER(S)				FIGURES				LETTER(S)			
1. Please state: • Personal Public Service Number (PPS number) same as RSI/Tax Number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
• First name(s):	<input type="text"/>								<input type="text"/>							
• Surname:	<input type="text"/>								<input type="text"/>							
• Birth Surname if different:	<input type="text"/>								<input type="text"/>							
• Mother's Birth Surname:	<input type="text"/>								<input type="text"/>							
• Address (If you and your spouse, civil partner or cohabitant are not living together give both Addresses):	<input type="text"/>								<input type="text"/>							
• Postcode:	<input type="text"/>								<input type="text"/>							
• Telephone/Mobile Number:	<input type="text"/>								<input type="text"/>							
• Email address:	<input type="text"/>								<input type="text"/>							
• Nationality:	<input type="text"/>								<input type="text"/>							
• Normal occupation:	<input type="text"/>								<input type="text"/>							
• Date of Birth:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	D	D	M	M	Y	Y	Y	Y								

2. Are you?

<input type="checkbox"/> Single	<input type="checkbox"/> Cohabiting	<input type="checkbox"/> Married
<input type="checkbox"/> Separated	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widowed
<input type="checkbox"/> In a Civil Partnership	<input type="checkbox"/> a former Civil Partner (A civil partnership since dissolved)	<input type="checkbox"/> a surviving Civil Partner

Part 2

Habitual Residence Condition

Habitual Residence is a condition that you must satisfy to qualify for Jobseeker's Allowance. Log on to www.welfare.ie for more information about Habitual Residence.

3. In what country were you born?

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4. What is your nationality?

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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 Common Travel Area all of your life?

YES NO

If **Yes**, please complete question 10 and 11
If **No**, please go to question 6 to 8

6. Have you lived in the Common Travel Area for the last two years?

YES NO

If **No**, please give details below about each country outside the Common Travel Area where you have lived.

Country	Date from	Date to	Why you lived there

7. When did you come to Ireland?

D	D	M	M	Y	Y	Y	Y

Have you lived continuously in Ireland since the day you arrived?

YES NO

8. Does any of your close family, for example parent, brother, sister or child, live in Ireland?

YES NO

If **Yes**, please give their details:

Name	Address	DATE OF BIRTH			Relationship to you	When they came to Ireland
		Day	Month	Year		

9. Have you ever made an application for Refugee Status?

YES

NO

If YES, please answer questions 9a and 9b below and give copies of all relevant documents from the Department of Justice and Equality.

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

Great Britain

Isle of Man

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:

Last address

Previous address

From

From

To

To

For Official Department use only

HRC Satisfied

HRC Not Satisfied

HRC1 issued

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?

YES NO

If **Yes**, please complete question 13(a)

If **No**, please go to question 14

13a. Were you on this Scheme for 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?

Less than 1 month

1 - 2 years

1 - 6 months

2 years or more

6 - 12 months

17b. If you are no longer in employment, how long did your last job last?

Less than 1 month

1 - 2 years

1 - 6 months

2 years or more

6 - 12 months

18. If you are still in employment, what are your gross weekly earnings?

€ .

Gross weekly earnings are your weekly earnings before tax, PRSI, union dues or other deduction.

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?

Part 4

Your Employment Details

26. What is your employment status?

- Working full-time
- Working part-time
- Working casually
- Self-employed (including farming)
- CE/SOLAS/TÚS
- Fully unemployed
- Never worked
- Other: _____

27. Please state:

- Your current/most recent Employer's name
- Address of Employer

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- Your occupation
- Dates of employment

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FROM

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	D	M	M	Y	Y	Y	Y

TO

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	D	M	M	Y	Y	Y	Y

- Work Pattern

I work(ed)	hours
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I work(ed)	days
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28. Why did your employment end/ working hours get reduced?

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29a. Did you get a redundancy payment?

YES NO

If **YES** please state:

- Amount received
- Date received

€ , .

D D M M Y Y Y Y

29b. Did you get a redundancy form RP50?

YES NO

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

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

YES NO

If **Yes**, please state:

- Name of employer
- Address of employer

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

YES NO

If **Yes**, please state:

- EU country
- Social Security Number/ European Number

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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

32. Please State:

- Type of work you are looking for?
- Are you available for full-time work?
- Are you looking for full-time work?
- Would you accept any other type of work?

If **No**, please give details

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YES NO

YES NO

YES NO

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33. Are you currently registered with any school, college or university?

If **Yes**, please state:

- Name of college
- Course name
- What type of student are you registered as?
- Hours of attendance (evenings included)
- When will the course end?
- Do you intend to resume college education in the coming academic year?

YES NO

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Full-time Part-time Online

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YES NO

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
- Source of payment
- Country of payment

YES NO

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Part 6

Your Spouse/Civil Partner or Cohabitant's Income Details

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

YES 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?

YES NO

If **Yes**, please state:

- 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?

YES NO

If **Yes**, please state:

- How often is s/he paid?
- Gross weekly income:

Weekly Fortnightly Monthly

€ .

Gross weekly income is your weekly income before tax, PRSI, union dues or other deduction.

Please complete form UP1(f) if self-employed.

Please attach the latest pay slips

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:

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:

If Yes, please state:

Country of payment

[][][][][][][][][][][][][][][][][][]

Type of payment

[][][][][][][][][][][][][][][][][][]

Weekly amount

€ [][][][] . [][]

Address of issuing office

[][][][][][][][][][][][][][][][][][][]

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? If Yes, please give details

YES NO

[]

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?

YES NO

Under age 18

Age 18-22 in full-time education

Please state:

Child 1

Surname

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First name(s)

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Relationship to you

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Does the child live with you?

YES NO

PPS Number

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Child 2

Surname

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First name(s)

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Relationship to you

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Does the child live with you?

YES NO

PPS Number

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Child 3

Surname

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First name(s)

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

Relationship to you

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Does the child live with you?

YES NO

PPS Number

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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.

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

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	D	M	M	Y	Y	Y	Y

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

YES

NO

Part 10

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.

Post Office Name and Address:

Please give details of the financial institution at which you wish to receive your payment.

Name of financial institution:

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Bank Identifier Code (BIC):

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International Bank
Account Number (IBAN):

Name of Account Holder:

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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.

WITNESS SIGNATURE

DATE

NAME OF
WITNESSADDRESS OF
WITNESS

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
<ul style="list-style-type: none"> • We will do all we can to process claims as quickly and as efficiently as possible. • 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 development opportunities for you. • We will work with you to help you prepare your Personal Progression Plan to assist you to take the right steps to employment. • 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 all such appointments. • We will treat you with dignity and respect and honour the confidentiality of our relationship.

Your Promise to Us
<ul style="list-style-type: none"> • I will work to secure employment at the earliest possible opportunity. • I will work with the Department to agree 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 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. • I will treat the staff of the Department with dignity and respect and honour the confidentiality of my relationship with the Department. • I will provide the Department with all information requested to assess any claim for income support. • I will abide by the Declaration in my 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 information in relation to my claim.

Signed: _____

Signed: _____

- 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

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.