# Childcare and OSCAR Subsidy Application



A service of the Ministry of Social Development

If you need help with this form call us on **a o8oo 559 009.** 

# Who can get this subsidy

If you need help filling in this form, please ask at your nearest Work and Income Service Centre.

Mehemea e hiahia me awhina a koe ki te whakaki i tenei panui, haere patai ki te poari o te Work and Income tata tonu ki a koe.

Afai e te mana'omia se fesoasoani i le faatumuina o so'o se pepa talosaga e uiga i penefiti, faamolemole faafesoota'i le ofisa o le Work and Income.

## If you are in work or study, or if there are special circumstances that mean you need access to childcare, you may get:

- a Childcare Subsidy for children under 5 years, or 6 years old if they receive a Child Disability Allowance, up to 50 hours a week
- an OSCAR Subsidy for before school and after school care up to 20 hours per week during term time, and up to 50 hours during school holidays, for children aged 5–13 years, or 14–18 years if they receive the Child Disability Allowance.

### If you are not in work or study you may get a Childcare Subsidy for up to nine hours a week. You can use this form for both subsidies – and you can use it to apply for a subsidy for more than one child. Your subsidy will start from the later of the:

- date of application
- date your child started attending the childcare facility.

If you have a 3 or 4 year old child, they may be able to receive up to 20 hours of free early childhood education *(20 Hours ECE)*. This will depend on the type of childcare service your child attends and whether the centre offers free hours. For more information speak to your childcare service.

## When to apply

### Apply now - before your child starts the programme.

In order to receive your subsidy from the day your child starts the programme, you need to submit your application to us before your child's first day. This is especially important for school holidays.

You can also apply online at www.workandincome.govt.nz

## What to bring $\checkmark$

Please ask Work and Income staff for help if:

- you do not have any of the documents we have asked for
- you think there could be a delay in providing this information
- you would like to know about extra help.

To apply for the Childcare and OSCAR Subsidy, you will need to complete this application form and provide the following for both you and your partner (if you have one):

- For New Zealand born clients, one form of government-issued documentation stating your full legal name and date of birth (eg your birth certificate, passport, driver licence, firearms licence, deed poll, etc)
- For people born overseas, proof of your lawful residence in New Zealand (eg New Zealand passport, other country passport with residence class visa or residence permit, citizenship certificate, etc)
- Two more documents supporting your identity. These could include your marriage certificate, bank statement, phone or power account, driver licence, etc)

### Note: One of the documents requested above must be at least 2 years old.

- Full birth certificates for your children if your children weren't born in New Zealand, we will need to see proof of their New Zealand citizenship or permanent residency.
- ) Proof of your work, course, study and number of hours.
- ) Proof of your income before tax payslips, business accounts or Child Support received.
- Proof of your residency status (eg visa or certificate of citizenship) if you were not born in New Zealand.

### Privacy Statement

The legislation administered by the Ministry of Social Development allows us to check the information that you give us in this form.

This may happen when you apply for a benefit and at any time after that.

#### The Privacy Act 1993 requires us to tell you that:

- The information you give us is collected under the authority of the legislation administered by the Ministry of Social Development.
- The information will be held by the Ministry of Social Development.
- The information is collected for the purposes of the legislation administered by the Ministry of Social Development (including Work and Income, Child, Youth and Family and other service lines
  - of the Ministry), and in particular for: granting benefits and other assistance under the Social Security Act 1964
  - providing employment related services
  - statistical and research purposes
  - providing advice to Government
  - care and protection needs of children providing support and services for you and your family
  - \_ providing education related services.
- Work and Income may contact health providers to verify any health related information you give us.
- Work and Income may give employers information about you to find you employment. Where Work and Income refer you to a job vacancy, we may also contact the employer to discuss the result of any job interview that you attend.
- Work and Income may share information you have given us with childcare centres to administer your entitlement to childcare assistance.
- Other information that you give us on your skills, aspirations, family circumstances etc, and that is not required to assess your entitlement to a benefit may be used to provide a better service to you by the Ministry of Social Development.
- The information you give us may be compared with information held by Inland Revenue, the Ministry of Justice, the Department of Corrections, the New Zealand Customs Service, the Department of Internal Affairs, the Accident Compensation Corporation, Housing New Zealand Corporation, Ministry of Health and Immigration New Zealand. It may also be compared with social security information (for example, pension or benefit information) held by other governments (including Australia and the Netherlands).
- Under the Tax Administration Act 1994, if you have dependent children, the information you give us may be shared with Inland Revenue for the purpose of administering Working for Families Tax Credits. Inland Revenue may also:
  - use the information for the purposes of child support, student loans and taxation
    - disclose it to the Department of Labour, Statistics New Zealand, the Ministry of Justice, the Accident Compensation Corporation, and the Ministry of Education
  - disclose your personal information to your partner.
- Under the Privacy Act 1993 you have the right to ask to see all information we hold about you, and to ask us to correct that information.
  - You are not required to give us information, but if you do not give us all the information we ask for, your application for benefits may be declined.

#### I must tell Work and Income immediately if I:

- have a change in work situation
- become self employed / start to run a business
- have changes to my/our income or financial circumstances
  - intend to travel overseas
- Changes in your living situation include: start / finish part-time or full-time study • marriage or separation
  - have changes to personal details (such as name, address or bank account details)
    - have changes to my/our living situation
  - am imprisoned / held in custody on remand
  - am admitted to or discharged from hospital
  - have been granted an overseas pension
  - have any other changes that may affect my/our benefit entitlement or rate.

Your client number is:

## Important

supported

**Obligations** 

whether paid or unpaid.

Work situation changes include starting

part-time, casual or full-time work,

starting or ending a civil union

relationship with someone of the

change in the number of children

change in accommodation costs.

starting or ending a de facto

same or opposite sex

#### Lunderstand that:

- if I have made a false statement or
- if I have failed to answer all the questions in full or
- if I do not tell Work and Income about changes in my life that might affect my entitlement or rate then
- my benefit may be reviewed and cancelled and
- I may have to pay back the total amount of any overpayment that I have received and
- Work and Income may impose a penalty (up to three times the value of the overpayment) or
- I may be prosecuted and fined or imprisoned.

### Additional information

Information required by				
l			J	
Day	Month	Year		
Contact	t name			
l			J	

# Childcare and OSCAR Subsidy Application – Part A

eck that you have all relevant "What to bring" items on the front of this form.  popplete all questions – if not applicable write N/A.  at is your name?  at is your name?  ame or family name  you known by or have you used any other names?  No  Yes ▶ Please give details below:  e you: Male Female
ame (s) hame or family name you known by or have you used any other names? No Yes ▶ Please give details below: e you: Male Female
No       Yes ▶ Please give details below:         e you:       Male         Female
at do you want to be called?       Mrs     Miss     Ms     Mr     No title     Othe
ere do you live? /house no. Street name urb City at is your mailing address (if different from above)? bu live at a rural address please include your rural delivery details here:
w can we contact you? k phone Home phone Mobile phone il Fax
at is your date of birth? Day Month Year

Posidonav				
Residency	10.	Indicate which describes your residency situation:		
<b>Q10 note:</b> Tick one box.		New Zealand citizen (by birth) F Go to Question 14		
		Date of citizenship		
		New Zealand citizen (other)     Day     Month     Year		
		Date permanent residence granted		
		Permanent resident		
		Day Month Year		
		Other > Go to Question 11		
	11.	What is your residency status?		
	12.	When did you arrive in New Zealand?     Day     Month     Year		
	13.	Where were you born?		
<b>Q14 note:</b> This means that you consider New Zealand your home,	14.	Do you usually live in New Zealand?		
you are a legal resident, usually live here and intend to stay permanently.	15.	Have you lived in any countries outside New Zealand?		
Ethnic group	16.	To what ethnic group do you believe you belong?		
<b>Q16 note:</b> You don't have to answer this question if you don't want to.		New Zealand Maori  Which tribe(s)/iwi?		
This information is for statistics and		New Zealand European Niuean Samoan Indian		
will be used for research and future development work.		Other European   Tokelauan   Tongan   Chinese		
		Cook Island Maori Other  Please specify below:		
Work details	17.	Are you currently working?		
		No F Go to Question 21		
		Yes  Please provide your employer's details below:		
		Employer's name		
		Business site address		
		Work phone Fax		
	18.	How many hours a week, including lunch hours, do you spend at work?		
	40	How many bours a week do you spend travelling from the centre to work and returning?		
	19.	How many hours a week do you spend travelling from the centre to work and returning?		
	20.	What is your gross weekly wage? \$		

Activity details	21. Are you doing activities arranged for you by Work and Income? No ▶ Go to Question 25 Yes
	22. What type of activities are you doing?
	23. How many hours a week do you spend at that activity?
	24. How many hours a week do you spend travelling from the centre to your activity and returning?
Education	25. Are you on a work-related course or studying? Yes No ► Go to Question 34
	26. Which organisation provides the course?
	27. What is the name of your course?
	28. Is the course NZQA accredited?
	No Yes
	29. When does the course start?
	30. When does the course finish?
	Day Month Year 31. How many hours a week do you spend at your course?
	32. How many hours a week do you spend on other study?
	33. How many hours a week do you spend travelling from the centre to your course and returning?
<b>Trainer's statement</b> This information is required under section 12 of the Social Security	I confirm that the above course details are true and complete. Trainer's name
Act 1964.	Organisation
	Organisation address
Official Training Provider's stamp	
	Work phone Fax
	Trainer's signature Date
	Day Month Year

## About your children

**Q34 note:** Children that you support are any children that you financially support and are living with you as a member of your family, including:

- stepchildren
- children at boarding school
- adopted children
- grandchildren
- mokopuna.

If you are caring for a child who is not your own you may be able to get other forms of assistance. Please ask us about this.

**Q35 note:** The Childcare Subsidy is for children aged under 5 years (or under 6 years if they get the Child Disability Allowance).

34.	Do you have any dependent children in your care?	
-----	--	--

Child's full name	Date of birth	
Relationship to you		
Child's full name	Date of birth	1
Relationship to you		
Child's full name	Date of birth	1
Relationship to you		
Which children do you wish to receive Childcare Subsidy f CHILD 1: Child's full name	Date of birth	
Does this child receive <i>20 Hours ECE</i> from any Childcare Service?	Day Month	Ye
No So to next child or Question 36		
Yes How many hours are received per week, in total?		
What date did the 20 Hours ECE start?		
	Day Month	Ye
Which centre does the child recieved <i>20 Hours ECE</i> f	rom?	
CHILD 2:		
Child's full name	Date of birth	
Does this child receive <i>20 Hours ECE</i> from any Childcare Service?	Day Month	Ye
No $\blacktriangleright$ Go to next child or Question 36		
Yes  How many hours are received per week, in total?		
What data did the as Using ECE starts		
What date did the <i>20 Hours ECE</i> start?	Day Month	Ye
Which centre does the child recieved 20 Hours ECE f		
CHILD 3:		
Child's full name	Date of birth	
	Day Month	Ye
Does this child receive <i>20 Hours ECE</i> from any Childcare Service?		
Does this child receive <i>20 Hours ECE</i> from any Childcare Service? No ▶ Go to Question 36		
No So to Question 36		
No Go to Question 36		

<b>Q36 note:</b> The OSCAR Subsidy is for school children aged 5–13 years (or 14–18 years if they get the Child Disability Allowance).	36.	school holiday programmes?	R Subsidy for before and after school care and/or le details of which children you need the subsidy for below:
If your child is attending more than one OSCAR School Holiday Programme, you will need to complete the OSCAR Subsidy- Additional School Holiday programme form.		Child's full name          1.         2.         3.	Name of the centre they go to
<ul> <li>Q37 note: 'Other reasons' include that you or your partner:</li> <li>are temporarily unable to continue employment because of illness or injury</li> <li>are attending an approved rehabilitation programme</li> <li>are a seriously disabled or ill caregiver</li> </ul>	37.		cation care for your child(ren) for a reason other than ng, or doing activities arrranged by Work and Income? le details below:
<ul><li>have another child in hospital</li><li>other reason.</li></ul>			

### **Income details**

**Q38 note:** Examples of income include:

- wages or salary
- accident compensation
- farm or business income
- self employment
- interest from savings or investments
- dividends from shares
- pensions
- redundancy or termination type payments
- Child Support
- overseas pensions
- board or rent
- Student Allowance or Scholarship
- any other income, eg family trusts.

Give gross (before tax) amount.

# Previous childcare assistance

**Q39 note:** We are asking you this to ensure that we will be paying you the correct rate.

### Partner

**Q40 note:** A partner is your spouse (husband or wife), your civil union partner, or a person of the same or opposite sex with whom you have a de facto relationship.

### 38. Do you or your partner (if you have one) receive a weekly income?

Yes > Please provide details below:

Doyo	uv
	No

Income source	Your income gross \$ a week BEFORE TAX	Your partner's income gross \$ a week BEFORE TAX
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Totals	\$	\$
Total combined income	\$	

If you are self-employed, please provide your full set of business accounts for the last 12 months. If you income changed over the year, please provide your income details for the last 26 weeks.

39. Have you or your partner received Childcare or OSCAR Subsidy at any time from 28 September 2009 up to and including 26 September 2010?

е		No Yes	5		
	40.	Do you have a partne	er?		
		No 🕨 Are you:	Single Widowed	Living apart/ separated	Divorced
			Go to Obligation	ns on page 11.	
		Yes > Are you:	Married	In a civil union In a	relationship

# Partner's Details

A service of the Ministry of Social Developn	ment	PARTNER CLIENT NUMBER			
•		Please check that you have all relevant "What to bring" items on the front of this form. Please complete all questions – if not applicable write N/A.			
Name	1.	What is your partner's name? First name(s) Surname or family name			
<b>Q2 note:</b> Give any other names that they use now or have used in the past (including their maiden name).	2.	Is your partner known by or used any other names?         No       Yes ▶ Please give details below:         1.         2.         Are they:       Male         Female			
<b>Q4 note:</b> Please tick one box to show the title they want to be known by.	4.	What do they want to be called?       Mrs     Miss     Ms     Mr     No title     Ot			
Address Os note: Please give their house number, street, suburb, and town or city. A house number could include: • street number • fire • RAPID • emergency services.	5.	Where does your partner live?         Flat/house no.       Street name         Suburb       City         Suburb       City         What is their mailing address (if different from above)?       If they live at a rural address please include their rural delivery details here:			
<b>Q6 note:</b> A mailing address could include: • street address • postal box (PO Box) • rural delivery details • C/O address.	7.	How can we contact them? Work phone Home phone Fax Fax			
Photo Late	8.	What is your partner's date of birth?			
Birth date		Day Month Year			

Residency	10.	Indicate which describes your partner's residency situation:
<b>Q10 note:</b> Tick one box.		New Zealand citizen (by birth) 🕨 Go to Question 14
		Date of citizenship
		New Zealand citizen (other)
		Day Month Year
		Date permanent residence granted
		Permanent resident Go to Question 12
		Day Month Year
		Other > Go to Question 11
		Other Go to Question 11
	11.	What is your partner's residency status?
	12.	When did your partner arrive in New Zealand?       Day       Month       Year
	13.	Where were they born?
<b>Q14 note:</b> This means that they consider New Zealand their home,	14.	Does your partner usually live in New Zealand?
they are a legal resident, usually live here and intend to stay permanently.		
	15.	Has your partner lived in any countries outside New Zealand?
Ethnic group	16.	To what ethnic group does your partner believe they belong?
<b>Q16 note:</b> You don't have to answer		New Zealand Maori 🕨 Which tribe(s)/iwi?
this question if you don't want to. This information is for statistics and		New Zealand European Niuean Samoan Indian
will be used for research and future development work.		Other European   Tokelauan   Tongan   Chinese
		Cook Island Maori Other > Please specify below:
Work details	17.	Is your partner currently working?
		No Go to Question 21
		Yes Please provide their employer's details below:
		Employer's name
		Business site address
		Work phone Fax
	18.	How many hours a week, including lunch hours, does your partner spend at work?
	10.	
	19.	How many hours a week does your partner spend
		travelling from the centre to work and returning?
	20.	What is your partner's gross weekly wage? \$
	20.	

Activity details	21. Is your partner doing activities arranged for them by Work and Income?         No ▶ Go to Question 25    Yes						
	22. What type of activities are they doing?						
	23. How many hours a week does your partner spend at that activity?						
	25. Now many nours a week does your partner spend at that activity:						
	24. How many hours a week does your partner spend travelling from the centre to the activity and returning?						
Education	25. Is your partner on a work-related course or studying?						
	Yes No > Go to Obligations on page 11.						
	26. Which organisation provides the course?						
	27. What is the name of their course?						
	28. Is the course NZQA accredited?						
	29. When does the course start?						
	Day Month Year						
	30. When does the course finish?						
	Day Month Year						
	31. How many hours a week does your partner spend at the course?						
	32. How many hours a week does your partner spend on other study?						
	33. How many hours a week does your partner spend travelling from the centre to the course and returning?						
Trainer's statement	I confirm that the above course details are true and complete.						
This information is required under section 12 of the Social Security	Trainer's name						
Act 1964.	Organisation						
	Organisation address						
Official Training Provider's stamp							
	Work phone Fax						
	Trainer's signature Date						
	Day Month	Year					

# Obligations

## Obligations

Work situation changes include starting part-time, casual or fulltime work, whether paid or unpaid. Changes in your living situation include:

- marriage or separation
- starting or ending a civil union
- starting or ending a de facto relationship with someone of the same or opposite sex
- change in the number of children supported
- change in accommodation costs.

### I must tell Work and Income immediately if either my partner or I:

- have a change in work situation
- become self employed / start to run a business
- have changes to my/our income or financial circumstances
- intend to travel overseas
- start / finish part-time or full-time study
- have changes to personal details (such as name, address or bank account details)
- have changes to my/our living situation
- am imprisoned / held in custody on remand
- am admitted to or discharged from hospital
- have been granted an overseas pension
- have any other changes that may affect my/our benefit entitlement or rate.

#### I agree that:

- I have completed all the questions in this Childcare and OSCAR Subsidy Application (or this form has been completed for me), and the information I have given is true and complete.
- The conditions for receiving this subsidy have been explained to me and I understand these conditions and my obligations.
- I am aware of and understand the Privacy Act statement contained in this form.

Client's name (print)	Client's signature	Date		
		Day	Month	Year
Partner's name (print)	Partner's signature	Date		
		Day	Month	Year

# Information for the childcare service

For more information, please read our brochure "Do you provide childcare or OSCAR services?". **This form needs to be completed by the childcare service supervisor.** The information you provide will help us to assess if the applicant is eligible for the Childcare Subsidy.

### Childcare services include:

- family daycare centres
- home-based childcare services
- Te Kohanga Reo.

### Childcare services also include some fee paying:

- kindergartens
- playcentres.

1.

# Childcare service details

What is the name of your childcare service?

### 2. How can we contact you?

Work phone	Home phone	Mobile phone
Email		Fax

### 3. Is your centre licensed or chartered by the Ministry of Education?

Yes > You may be asked to provide proof.

No

Please call 2 0800 559 009 and ask for your local Childcare Coordinator.

### 4. What is your Work and Income childcare service number?

I I I I	ר זו ר	

5. Does your childcare service offer 20 Hours ECE?

### Yes No

### 6. Please provide details of childcare provided.

Child's full name					
1.					
Hours of care (weekly total)	Hours of <i>20 Hours ECE</i> received (weekly total)		e	Your hourly fee (before subsidy)	Total weekly fee (before subsidy)
		/	/	\$	\$
Child's full name					
2.					
Hours of care (weekly total)	Hours of <i>20 Hours ECE</i> received (weekly total)		e	Your hourly fee (before subsidy)	Total weekly fee (before subsidy)
		/	/	\$	\$
Child's full name					
3.					
Hours of care (weekly total)	Hours of <i>20 Hours ECE</i> received (weekly total)		e	Your hourly fee (before subsidy)	Total weekly fee (before subsidy)
		/	/	\$	\$
Child's full name					
4.					
Hours of care (weekly total)	Hours of <i>20 Hours ECE</i> received (weekly total)		e	Your hourly fee (before subsidy)	Total weekly fee (before subsidy)
		/	/	\$	\$

**Note:** If you offer *20 Hours ECE* you can't charge a fee for those hours. The Childcare Subsidy cannot be used to cover any donations or optional charges that may be asked.

Childcare service	7.	If your centre o	closes, what	dates a	are you c	losed for?				
details – <i>continued</i>		End of Term 1	Closed from:				Reopens:			
			,	Day	Month	Year		Day	Month	Year
		End of Term 2	Closed from:				Reopens:			
			,	Day	Month	Year		Day	Month	Year
		End of Term 3	Closed from:				Reopens:			
				Day	Month	Year		Day	Month	Year
		Christmas holidays	5 Closed from:				Reopens:			
				Day	Month	Year		Day	Month	Year
		Other holidays	Closed from:				Reopens:			
				Day	Month	Year		Day	Month	Year
	8.	Do you charge	a holding fee	e for al	osences	or over the	school ho	lidays	?	
	The	information I ha	ve given is tr	ue and	complet	.e.				
<b>statement</b> his information is required under ection 12 of the Social Security Act	The	information I ha	ve given is tr	ue and	complet	.e.				
Supervisor's statement This information is required under section 12 of the Social Security Act 1964. Supervisor's name (print)	The		<b>ve given is tr</b> rvisor's signature		complet	.e.	Da	te		

Day Month Year

# Part C – OSCAR Programme Supervisor To Complete

A service of the Ministry of Social Developmen	nt		C	LIENT	NUMBER			
Information for the OSCAR programme service	prov OSC	vide will help us	to assess if <b>s are for ch</b>	the ap	plicant is elig under 14 year	ible for <b>s of age</b>	the supervisor. Th the OSCAR Subsi e (or 14–18 years	
For more information, please read our brochure "Do you provide childcare or OSCAR services?".	•	before and after school holiday p	school care	9				
OSCAR programme details	1.	Which terms		Te	<b>ammes are y</b> rm 2 oliday ogramme	ou apply	ying for? ) Term 3 ) Holiday Programme	Term 4 Holiday Programme
	2.	What is the p	rogramme	name?				
	3.	How can we c	ontact you		ome phone		Mobile pho	ne
		Email					Fax	
	4.	Yes ►	Please attach a provided).	a copy of	your Ministry of S	Social Dev	ial Development? elopment approval (if al Childcare Coordinat	you haven't already
	5.	What is your	Work and In		OSCAR provid	der num	iber?	
	6.	Please provid	le details of	f OSCA	R care provid	ed.		
		1. Hours of care (weekly total)	Date they started care		Date they ended care		Your hourly fee (before subsidy)	Total weekly fee (before subsidy)
			/	/	/	/	\$	\$
		Child's full name						
		2. Hours of care	Date they		Date they		Your hourly fee	Total weekly fee
		(weekly total)	started care	/	ended care	/	(before subsidy)	(before subsidy)
		Child's full name	· · ·		,			
		3.						
		Hours of care					Your hourly fee	

OSCAR programme details – <i>continued</i>	<ul> <li>7. If the care is f conchool holidays, is the parent paying in advance?</li> <li>8. No Yes ► Part payment in advance: \$</li> <li>8. No Yes ► Part payment in advance: \$</li> </ul>						
Supervisor's statement	The information I have given is true and complete.						
This information is required under section 12 of the Social Security Act 1964.							
Supervisor's name (print)	Supervisor's signature Date Date Day Month Year						

Day Month

Year

## **OFFICE USE ONLY**

### Checklist

Application entered into UCVII

Does the client receive Child Disability Allowance?

### **Payments**

Processing officer to complete. Note if the centre's fee is less then the subsidy rate, just pay the centre fee.

Child's full name	Weekly subsidy	Start date	End date
Grant Childcare Subsidy – before and after school			
	\$	/ /	/ /
	\$	/ /	/ /
	\$	/ /	/ /
	\$	/ /	/ /
	\$	/ /	/ /
Grant OSCAR Subsidy – out of school			
	\$	/ /	/ /
	\$	/ /	/ /
	\$	/ /	/ /
	\$	/ /	/ /
	\$	/ /	/ /
Grant OSCAR Subsidy – school holidays			
	\$	/ /	/ /
	\$	/ /	/ /
	\$	/ /	/ /
	\$	/ /	/ /
	\$	/ /	/ /

### Decision

..... (

Granted Declined		
Comments		
Processor's signature	Authenticator's signature	Date

Year

Day

Month