

Course Participation Assistance application



MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Course Participation Assistance is to pay for costs you have because you're attending a short-term employment related course or programme. To get this assistance you must be getting a benefit or be on a stand-down for a benefit and meet some other conditions.

In this application, if we say 'your partner' this only applies if you have one.

Tell us about yourself

Write your client number here. It can be found on your Community Services Card if you have one.

Client number

Tell us your details

1

What is your full name?

First and middle names

Surname or family name

2

What date were you born?

Day Month Year

Tell us how we can contact you

3

Where do you live?

Flat/House number Street name

Suburb

Town/City

HOW TO ANSWER Q3:

If you live in a rural area, flat/house number could include your RAPID number, fire number, emergency services number.

4

Is your mailing address different from where you live?

No

Yes



If yes, tell us your mailing address

HOW TO ANSWER Q5:

Please only give us contact details you'd like us to use.

5

How else can we contact you?

Tick the best way for us to first contact you

Home phone	()	
Mobile phone	()	
Other phone	()	

Tell us about your income and assets

Tell us about income

6

Do you and your partner get any income?

- Wages or salary No Yes
- Termination pay No Yes
- Redundancy pay No Yes
- Accident compensation (eg ACC) No Yes
- Income insurance (replacement/protection) No Yes Jointly with partner
- Farm or business income No Yes Jointly with partner
- Payments from self-employment or contract work No Yes Jointly with partner
- Interest from savings, investments, or bonds No Yes Jointly with partner
- Dividends from shares, unit trusts, or managed funds No Yes Jointly with partner
- Income from rents No Yes Jointly with partner
- Payments from boarders or flatmates No Yes Jointly with partner
- Child Support payments (private arrangement or through Inland Revenue) No Yes
- Other income for a child No Yes
- Maintenance payments No Yes
- Payments from a former partner No Yes
- Student Allowance, scholarship, or Student Loan living cost payments No Yes
- Overseas pension, benefit or allowance payments No Yes
- Other superannuation or retirement scheme income (government or private) No Yes
- Income from an estate, if you've inherited money No Yes Jointly with partner
- Income from trusts No Yes Jointly with partner
- Other No Yes Jointly with partner

ATTACHMENT FOR Q6:

Bring a copy of your business accounts.

INFORMATION FOR Q6:

In this application form, 'partner' means the person you're married to or in a civil union or relationship with, not a business partner.

7

Did you answer 'yes' or 'jointly with partner' to any of the sources of income listed in question 6?

- No Yes

↓ If yes, tell us the total before-tax amounts

Where did the income come from?	Payment made to?		
	You	Your partner	Jointly with partner
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

ATTACHMENT FOR Q7:

You need to show us proof of income you get.

Tell us about your assets

8

Do you or your partner have any of the following cash assets?

- Money in bank or other savings No Yes
- Bonds, shares, debentures or stocks No Yes
- Money lent to other people or organisations No Yes
- Other cash assets No Yes

9

If you answered 'yes' to any of the assets listed above, please write the details below.

Type of asset	You	Your partner	Jointly owned
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

Tell us about the course

Tell us the course details

10

What's the name of the organisation that's running the course or programme?

11

What are the dates of the course or programme?

Start date			End date		
Day	Month	Year	Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

12

What work skills do you want to get from the course or programme?

13

What type of paid work will this course or programme help you get?

14

Tell us about your training costs

What extra costs do you have while you're on the course or programme?

What the cost is	How much	How often (for example weekly, fortnightly)
	\$	
	\$	
	\$	

ATTACHMENT FOR Q8:
You may be asked to provide proof of your assets and their value.

HOW TO ANSWER Q10:
Examples of organisations include:

- Wellington Institute of Technology
- Te Wānanga o Aotearoa

If you're doing work experience, please provide the employer's name.

HOW TO ANSWER Q12:
Examples of work skills include:

- driving a forklift
- welding.

ATTACHMENT FOR Q8:
Please bring proof of the things you need to pay for.

Signature

Let us know when things change

You need to let us know about changes that might affect the amount you're paid, like:

- starting, stopping or changing jobs
- starting or finishing part-time or full-time study
- changes to your pay or other income, including getting an overseas pension
- starting to run a business (for yourself or someone else).

Changes to information about you or your family, like:

- name, address, contact details or bank account number
- starting or ending a relationship, marriage, or civil union
- a partner passes away
- the number of children in your care, including having another baby.

We also need to know if you:

- are travelling overseas
- go into or come out of hospital
- are being held in custody or on remand.

Your rights

If you don't think we have things right or there's something you don't understand:

- call us – we can usually fix it over the phone
- you have the right to ask us to review the decision. Find out how at msd.govt.nz/reviews

Privacy

You have a right to ask to see your personal information, and ask for it to be corrected if it's wrong.

- If you have a question or a complaint, please get in touch.
- You can find full details about what we do with personal information in our privacy notice at workandincome.govt.nz/privacy.

Signature

- I've answered all the questions that apply to me and my situation.
- I understand the changes I need to let you know about.
- The information I've given you is true and complete.
- I understand what you do with my personal information and how you protect my privacy.

Applicant's name (print)

Applicant's signature

Day Month Year

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