

# 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.

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#### Is your mailing address different from where you live?

No       Yes

#### HOW TO ANSWER Q4:

Mailing address can include a PO Box, rural delivery details, or C/O address.

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#### 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 your income

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

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

No  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 the 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

Bonus Bonds, shares, debentures or stocks  No  Yes

Money lent to other people or organisations  No  Yes

Other cash assets  No  Yes

**ATTACHMENT FOR Q8:**

You may be asked to provide proof of your assets and their value.

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?

**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.

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What are the dates of the course or programme?

Start date

<input type="text"/>	<input type="text"/>	<input type="text"/>
Day	Month	Year

End date

<input type="text"/>	<input type="text"/>	<input type="text"/>
Day	Month	Year

12

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

  
  


**HOW TO ANSWER Q12:**

Examples of work skills include:

- driving a forklift
- welding.

13

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

  
  


### Tell us about your training costs

14

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:**

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](https://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](https://workandincome.govt.nz) and search on 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

Date

<input type="text"/>	<input type="text"/>	<input type="text"/>
Day	Month	Year