

Orphan's/Unsupported Child's Benefit application form



MINISTRY OF SOCIAL
DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

If you need more information go to our website workandincome.govt.nz or call us on **0800 559 009**.

We suggest you read the instructions on pages 1 to 4 of this application form before starting to fill it out, so you get a feel for what is needed.

Support we can give you

If you're raising someone else's child, we may be able to help by meeting some of the costs involved.

Orphan's Benefit is for people looking after someone else's child because their parents have died or can't be found, or when they can't look after their child because the parent has a long-term illness.

Unsupported Child's Benefit is for people looking after someone else's child because the child's parents can't support them due to a family breakdown.

The child you are looking after must be:

- aged under 18 years, and
- single, and
- financially dependent on you.

You must:

- be aged 18 years or older, and the main caregiver of the child, and
- expect to care for the child for 12 months or more, and
- not be the child's natural or adoptive parent or the step-parent if you are applying for the Unsupported Child's Benefit.

Both you and the child must also normally live in New Zealand.

You must give us all the information we need.

If you don't have all the information we need, talk with us and we may be able to help.

If we find out later that any information you give us is not true, or that you knew information you should have told us and did not tell us, we may stop paying your benefit. You might need to pay money back. In some cases you could even be prosecuted.

Our commitment *to YOU*



We will get to know you,
your situation and
your needs

Ka mōhio
ki a koe

—
**know
you**

We will make sure you
understand everything
you need to know



We will use your
feedback to improve
our service

We will respect your
privacy and be clear
about how we use
your information and
who we share it with



We will let you know
everything you may
be eligible for

Ka tautoko
i a koe

—
**support
you**

We will help you
however we can,
as soon as we can



The information
we give you will
be accessible and
consistent no matter
how you contact us

We will be honest
about our mistakes
and put them right



We will respect you
and what is important
to you

Ka mahi
tahi ki a koe

—
**with
you**

We will work
together to achieve
shared goals



We will let you know
your options, rights
and obligations

Our actions will
follow our words



How did 
wedo?

Let us know by visiting msd.govt.nz/feedback
or call us on 0800 559 009

Orphan's/Unsupported Child's Benefit checklist



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Once you've filled in the application form, use this checklist to tick off all the documents you need for your meeting with us.

Talk to us if you don't have any of the documents, have given them to us recently or if there might be a delay in getting them.

What you need to bring

INFORMATION NOTE:
Documents need to be originals, or copies of documents that have been certified as a **true copy** by a Solicitor/Lawyer, Notary Public, Registrar of the Court or Justice of the Peace.

Proof of who you are:

For you

For your partner
(if you have one)

If you were born in New Zealand, bring one type of official identification that has your full legal name and your date of birth (for example, your birth certificate, passport, driver licence, firearms licence, deed poll).

If you were born overseas, bring proof that you have a right to live in New Zealand (for example, a citizenship certificate, a New Zealand passport, a passport from another country with residence class visa or proof of permanent residence).

If your name has changed, bring your marriage certificate, deed poll, or other proof of the name change.

All people applying need to bring **two** more documents that help to prove who you are (for example, a marriage certificate, bank statement, phone or power account, driver licence).

A form or letter from Inland Revenue showing your tax number.

Proof of your bank account details, such as a bank statement or deposit slip.

One of the documents above must be at least two years old.

There are more things you need to bring in the table over the page.

What you need to bring for the child

What you need to bring for the child

Proof of who the child is:

Full birth certificate for the child that you're raising

Proof of any income for the child. This may be income that either you or the child receive

For Orphan's Benefit you also need to bring:

Death certificate(s) for the parents and any estate details

For Unsupported Child's Benefit you also need to bring:

Copies of Family Group Conference outcomes or Court Orders or Court approved plans

Orphan's/Unsupported Child's Benefit application form



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Tell us about yourself

If you've received a benefit or extra financial help from us before, write your client number here if you know it. This number can be found on your Community Services Card if you have one.

Client number

 | |

Tell us the names you have been known by

ATTACHMENT FOR Q1:

Bring proof of your identity. What you need to bring is explained on page 3.

HOW TO ANSWER Q3:

For example, have you had married names, English names, changes by deed poll, or aliases?

ATTACHMENT FOR Q3:

Bring your marriage certificate, deed poll, or other proof of any name change.

1

What is your full name?

 Mr Mrs Ms Miss Other

First and middle names

Surname or family name

2

Is the name on your birth certificate the same as above?

 No **Tell us the name that is on your birth certificate** Yes

First and middle names

Surname or family name

3

Have you ever been known by any other name?

 No Yes **Write them all out below**

1.

2.

4

What name would you like us to call you?

 The name I wrote in Question 1 The name I wrote in Question 2
 Other **Write the full name below**

Tell us more about you

5

What date were you born?

Day	Month	Year

6

Are you:

Male
 Female
 Gender diverse

7

What is your Inland Revenue tax number?

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

8

What bank account would you want your payments to be paid into?

The account is in the name of:

The account number is:

Bank	Branch	Account number	Suffix
■	/	■	■

ATTACHMENT FOR Q7:
Bring a form or letter from Inland Revenue showing your tax number.

ATTACHMENT FOR Q8:
You will need to provide proof of your bank account details, such as a bank statement or deposit slip.

Tell us how we can contact you

9

Where do you live?

Flat/House number Street name

--	--

Suburb

Town/City

HOW TO ANSWER Q9:
If you live in a rural area, flat/house number could include your RAPID number, fire number, emergency services number.

10

Is your mailing address different from where you live?

No
 Yes
 [↓ Tell us your mailing address](#)

HOW TO ANSWER Q10:
Mailing address can include a PO Box, rural delivery details, or C/O address.

11

How else can we contact you?

Tick the best way for us to contact you

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

HOW TO ANSWER Q11:
Please only give us contact details you'd like us to use.

12

Do you agree to get emails from us?

No
 Yes
 [↓ Tell us your email address](#)
 I don't have an email address

Tell us your ethnicity

13

Tick the group(s) you most identify with.

Māori → **Which tribe(s) or iwi?**

New Zealand European Niuean Samoan Indian

Other European Tokelauan Tongan Chinese

Cook Island Māori Other ↓ **Please write below** Don't want to answer

① INFORMATION FOR Q13:

We collect this information for statistics we use in research and future development work.

Tell us about your residence status

14

Do you usually live in New Zealand?

No Yes

② HOW TO ANSWER Q14:

This means you consider New Zealand your home, you're a legal resident, you usually live here and you intend to stay.

15

What best describes your residence status in New Zealand? Tick only one box.

New Zealand citizen by birth **Go to question 18**

Granted New Zealand citizenship → **Date citizenship granted**
Day Month Year

Go to question 16

Granted permanent residency → **Date permanent residence granted**
Day Month Year

Go to question 16

Other ↓ **What is your residence status?**

16

When did you arrive in New Zealand?

Day Month Year

17

What country were you born in?

Tell us about the child

Tell us the names the child has been known by

18 What is the child's name?

First and middle names

Surname or family name

19 Is the name on the child's birth certificate the same as above?

No



Tell us the name that is on the child's birth certificate

Yes

First and middle names

Surname or family name

20 Has the child ever been known by any other name?

No

Yes



Write them all out below

1.

2.

21 What date was the child born?

Day

Month

Year

Tell us about the child's residence status

22 Was the child born in New Zealand?

No

Yes

Go to question 27

23 When did the child arrive in New Zealand?

Day

Month

Year

24 What country was the child born in?

25 Where was the child's birth registered?

26 How long will the child stay in New Zealand?

Tell us about the caring arrangements for the child

27

Is the child living with you at your address?

No



Give reasons why not below

Yes

28

When did the child come into your care?

--	--	--

Day Month Year

29

How long will the child be in your care?

--

30

Why did the child come into your care?

31

What is your relationship to the child?

Natural parent

Adoptive parent

Step-parent

Not related

Other relative



Please explain below

Tell us about income for the child

32

Do you get any income on behalf of the child?

No

Yes

↓ Please provide details below

Where/who does it come from?	How much?	How often (weekly, fortnightly, etc)
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

HOW TO ANSWER Q32:

Examples of income on behalf of the child are:

- money from the child's parents
- ACC
- Oranga Tamariki
- other organisations.

ATTACHMENT FOR Q32:

Please provide proof of payments.

33

Does the child get any income apart from what they earn themselves?

No

Yes

↓ Please provide details below

Where/who does it come from?	How much?	How often (weekly, fortnightly, etc)
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Establishment grant

This is a one-off contribution to help with the costs when a child first comes into your care, such as a bed, bedding and clothing. If you or your partner have received (or have been approved to receive) an upfront payment as part of the Home for Life support package you won't be eligible for this grant.

INFORMATION FOR Q34:

The Home for Life support package is available for approved Home for Life, parents.

34

Have you or your partner received an upfront payment from Oranga Tamariki as part of the Home for Life support package?

No

Yes

35

Where to next in this form

What type of assistance are you applying for?

Orphan's Benefit

Go to question 36

Unsupported Child's Benefit

Go to question 58



Tell us about the child's parents

Tell us about one of the child's parents

36

Parent 1

What is the name of this parent?

First and middle names

Surname or family name

HOW TO ANSWER Q37:

For example, have they had married names, English names, changes by deed poll, or aliases?

37

Are they known by or have they used any other names?

No

Yes



Write them all out below

1.

2.

38

What is their date of birth?

Day Month Year

39

Has this parent died?

No

Go to question 42

Yes

40

Where was their death registered?

41

What are the name and contact details of the person who administers their estate?

Flat/House number Street name

Suburb

Town/City

Home phone

()

Mobile phone

()

Email

42

Is this parent in hospital?

No

Yes

**Please provide details below**

Date of admission:

Day

Month

Year

Hospital name:

43

What is this parent's last known address?

Flat/House number

Street name

Suburb

Town/City

44

When did someone last hear from them?

Day

Month

Year

Tell us about the child's other parent

Parent 2

45

What is the name of the child's other parent?

First and middle names

Surname or family name

46

Are they known by or have they used any other names?

No

Yes

**Write them all out below**

1.

2.

47

What is their date of birth?

Day

Month

Year

48

Has this parent died?

No

Go to question 51

Yes

49

Where was their death registered?**HOW TO ANSWER Q46:**

For example, have they had married names, English names, changes by deed poll, or aliases?

50**What are the name and contact details of the person who administers their estate?**

Flat/House number

Street name

Suburb

Town/City

Home phone

()

Mobile phone

()

Email

51**Is this parent in hospital?**

No

Yes

**Please provide details below**

Date of admission:

Day

Month

Year

Hospital name:

52**What is this parent's last known address?**

Flat/House number

Street name

Suburb

Town/City

53**When did someone last hear from them?**

Day

Month

Year

Tell us if the child has lived overseas

Tell us if the child has lived overseas

54

Has the child lived in any countries outside of New Zealand?

No

[Go to question 55](#)

Yes

Please list details below

Name of country	Date child entered this country	Date child left this country	Reason for being in this country
	/ /	/ /	
	/ /	/ /	
	/ /	/ /	
	/ /	/ /	

55

Are you or any other person getting a social security pension or pension of a similar nature for the child from the government of a country other than New Zealand?

No

[Go to Obligations and Privacy on page 20](#)

Yes

Tick the box that best describes the payments

Widow or survivor

Child or dependent

Disability or health condition

Other

56

If you ticked 'yes' for question 55, please give details of the payments.

	Payment 1	Payment 2
What country does the payment come from?		
How much is received each time the payment is made (in overseas currency)?		
Is this amount before or after tax?		
How often is the payment received (for example: weekly, fortnightly, monthly)?		
What is the name of the pension, allowance or benefit?		
What is the payment reference number?		

57

Is this social security benefit or benefit of a similar nature paid to you?

No

Please provide details below for the person who receives the payments

Yes

[Go to Obligations and Privacy on page 20](#)

First and middle names

Surname

Flat/House number

Street name

Suburb

Town/City

Phone	()
Mobile phone	()
Email	

Unsupported Child's Benefit

extra information



Tell us about the child's parents

Tell us about the child's custody arrangements

58

Are you fully supporting the child?

No



Please provide details of what help you get from the parents

Yes

59

Who has legal custody of the child?

60

What was the date of the custody order?

Day Month Year

61

Have you had any contact with a social worker from Oranga Tamariki or another authorised agency?

No

Yes



Please give the name of the social worker and name of the Oranga Tamariki or other authorised agency office.

62

Have you and the child's family attended a Family Group Conference organised by Oranga Tamariki or another authorised agency?

No

Yes



Please tell us the date of the conference

Day Month Year

63

Have you received any support from Oranga Tamariki or another authorised agency for the child?

No

Go to question 65

Yes



Please provide details below

Reason for payment	How much	How often (such as weekly)
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	<input type="text"/>

INFORMATION FOR Q61

Other authorised agencies include:

- iwi social services
- cultural social services
- child and family support services.

For more information go to workandincome.govt.nz and search on *other authorised agency*.

ATTACHMENT FOR Q62:

If 'yes' please bring any documentation you would have been given at this meeting.

HOW TO ANSWER Q63:

Examples of support are board payments, counselling, etc.

64

Have payments from Oranga Tamariki stopped or are they about to stop?

No

Yes

↓ When did or will they stop?

Day Month Year

65

Were the child's immediate previous caregivers the child's parents/guardians?

No

Yes

Go to question 68

66

What is the name of the child's previous caregiver?

First and middle names

Surname or family name

67

Why is the child no longer living with the previous caregiver?

68

Why are the child's parent's/guardians not able to provide fully for this child?

69

Was the living arrangement ordered by any of the following?

No

Yes

↓ Please tick which agency

Courts

Oranga Tamariki

Not applicable

Other agency

↓ Please name agency below

HOW TO ANSWER Q68:

Give reasons:
Has there been a breakdown?
Comment on financial, accommodation, disability or other limitations.

ATTACHMENT FOR Q69:

Please bring copies of the Court orders or documentation from Oranga Tamariki where applicable.

Tell us about one of the child's parents

70

Parent1

What is the name of this parent?

First and middle names

Surname or family name

HOW TO ANSWER Q71:

For example, have they had married names, English names, changes by deed poll, or aliases?

71

Are they known by or have they used any other names?

No

Yes



Write them all out below

1.

2.

72

What is their date of birth?

Day Month Year

73

Do you know where this parent lives?

No



If you can, please give the last known address below

Yes



Please provide details

Flat/House number Street name

Suburb

Town/City

Home phone ()

Mobile phone ()

Email

74

Do you know where this parent works?

No



If you can, please give the details below for their last employer

Yes



Please give details of their employer. If the parent is self-employed, give the name, address and telephone number of their business

Business' name

Business' contact details

Address		
Phone number	()	Fax ()
Email		

HOW TO ANSWER Q75:

Examples of further details are:

- names and addresses of parents, siblings or friends
- details of insurance, bank accounts or shares
- names and addresses of accountants or solicitors.

75

Can you give any other details to help find this parent?

No Yes **↓ Please give details below**

76

Does this parent ever get in touch with you or the child?

No Yes **↓ Please tell us about the contact and how often it occurs below**

INFORMATION FOR Q76

If the parent gets in touch with you, please pass on any additional information to us.

Tell us about the child's other parent

77

Parent 2

What is the name of the child's other parent?

First and middle names

Surname or family name

78

HOW TO ANSWER Q78:

For example, have they had married names, English names, changes by deed poll, or aliases?

Are they known by or have they used any other names?

No Yes **↓ Write them all out below**

1. _____
 2. _____

79

What is their date of birth?

____ | ____ | ____

Day Month Year

80

Do you know where this parent lives?

No **↓ If you can, please give the last known address below**

Yes **↓ Please provide details**

Flat/House number

Street name

Suburb

Town/City

Home phone ()

Mobile phone ()

Email _____

81

Do you know where this parent works?

No **↓ If you can, please give the details below for their last employer**

Yes **↓ Please give details of their employer. If the parent is self-employed, give the name, address and telephone number of their business**

Business name

Number

Street name

Suburb

Town/City

Work phone ()

Mobile phone ()

Email

HOW TO ANSWER Q82:

Examples of further details are:

- names and addresses of parents, siblings or friends
- details of insurance, bank accounts or shares
- names and addresses of accountants or solicitors.

INFORMATION FOR Q83

If the parent gets in touch with you, please pass on any additional information to us.

82

Can you give any other details to help find this parent?

No Yes **↓ Please give details below**

83

Does the parent ever get in touch with you or the child?

No Yes **↓ Please tell us about the contact and how often it occurs below**

Tell us if you get child support

84

Does either parent pay child support?

No

Yes **↓ Please give details of the payments**

Who pays?	What do they pay for?	How much?	How often (such as weekly, fortnightly)
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Orphan's / Unsupported Child's Benefit obligations and privacy



MINISTRY OF SOCIAL
DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

You need to read and complete this section.

This part of the application form:

- lists your obligations
- explains what will happen if obligations are not met
- explains how we protect the information you give to us, and what we can do with it
- includes a signature page for you to sign.

Obligations

These are what you have to do to receive payments from Work and Income. Please read all the obligations because they could apply to you if your circumstances change.

Change of circumstances

I must tell Work and Income immediately if :

- the care and/or support arrangements for the child change
- the financial circumstances of the child change
- either the child or I intend to travel overseas
- I have changes to personal details (such as name, address or bank account number)
- either the child or I have any other change that may affect my benefit entitlement or rate.

Not telling us about changes in your circumstances

I understand that if I don't tell Work and Income about changes that might affect whether I can get Orphan's/Unsupported Child's Benefit or the amount I'm paid, that:

- 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), and
- I may be prosecuted and fined or imprisoned.

You have the right to review or dispute any decision to reduce or stop your benefit.

Privacy Statement

The Ministry of Social Development includes Work and Income, MSD Housing Assessment, Senior Services, StudyLink and other service lines. The legislation administered by the Ministry of Social Development allows us to check the information that you give us. This may happen when you apply for assistance and at any time after that. The Privacy Act 1993 requires us to tell you why we collect the information and what we will do with it.

Why we collect information

The information you give us is collected under the authority of the legislation administered by the Ministry of Social Development and 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:

- granting benefits and other assistance under the Social Security Act 2018
- delivering superannuation services under the New Zealand Superannuation and Retirement Income Act 2001
- delivering assistance under the Veterans' Support Act 2014
- providing services under the Residential Care and Disability Support Services Act 2018
- statistical and research purposes
- providing advice to Government
- providing support and services for you and your family
- providing education related services
- care and protection needs of children
- assessing eligibility for social housing and calculating income-related rents under the Housing Restructuring and Tenancy Matters Act 1992
- assessing whether you and/or your partner may be entitled to an overseas pension, benefit or allowance.

You are not required to give the Ministry of Social Development information, but if you do not give us all the information we ask for, your application for benefits or pensions and other assistance may be declined.

We may contact health practitioners

The Ministry of Social Development may contact health practitioners to check any health related information you give us.

We may use information for public housing

Information you give us when you apply for assistance, and at any time after that, may also be used for public housing purposes under the Housing Restructuring and Tenancy Matters Act 1992, including reviewing your eligibility for social housing or your income-related rent. Public housing is subsidised housing available to people in the greatest need of housing for the duration of their need. It is provided by Kāinga Ora and approved community housing providers.

We may compare the information you give us with information held by other agencies

The information you give us may be compared with information held by other agencies such as Inland Revenue, the Ministry of Justice, Department of Corrections, New Zealand Customs Service, Department of Internal Affairs, Accident Compensation Corporation, Kāinga Ora, 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, Malta and the Netherlands).

We may share information with Inland Revenue

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 Ministry of Business, Innovation, and Employment, Statistics New Zealand, the Ministry of Justice, the Accident Compensation Corporation, and the Ministry of Education
- disclose your personal information to your partner.

We may give information to service providers, employers, public housing providers and childcare providers

The Ministry of Social Development may:

- give employers information about you if you use our employment services
- share information with childcare centres to administer your entitlement to childcare assistance
- give information about you to the Tertiary Education Commission, Workbridge, training providers, career services or other agencies that have a formal agreement to provide services on behalf of the Ministry of Social Development, if you use our employment services
- share information about you with public housing providers (such as Kāinga Ora) to administer your housing-related assistance.

We may use your information to give you a better service

Other information that you give us that is not required to assess your entitlement may be used to provide a better service to you.

You have the right to see and correct your information

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.

Signature page for Orphan's/Unsupported Child's Benefit

Office copy

By signing this application form, you agree to meet your obligations and conditions of grant

Applicant

I have completed all the questions or they have been completed for me in this Orphan's/Unsupported Child's Benefit Application.

The information I have given is true and complete.

The conditions for receiving this assistance have been explained to me and I understand these conditions.

I have read (or had explained to me) and understood the Privacy Statement contained in this application form

Applicant's name (print)

Applicant's signature

Date

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

If we find out later that any information you give us is not true, or that you knew information you should have told us and did not tell us, we may stop paying your benefit. You might need to pay money back. In some cases you could even be prosecuted.

If someone has completed the application form for you please get them to complete the Helper's statement below.

Please use the Checklist (page 3) to help you make sure you bring all the documents you need to your meeting with us.

Helper's statement

Complete this if you have helped the applicant or their partner to complete this application form.

What is your full name?

First and middle names

Surname or family name

What are your contact details?

Address

Phone

Tick the box for the statement that applies

- I completed this application form at the request of the person applying for Orphan's/Unsupported Child's Benefit. They told me they understood what they were signing. The statements and answers I have completed are true and complete as given to me by the person applying.

Helper's signature

Date

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

Signature page for Orphan's/Unsupported Child's Benefit

Applicant's copy

By signing this application form, you agree to meet your obligations.

Applicant

I have completed all the questions or they have been completed for me in this Orphan's/Unsupported Child's Benefit Application.

The information I have given is true and complete.

I have read (or had explained to me) and understood the conditions for receiving this assistance have been explained to me and I understand these conditions.

I have read (or had explained to me) and understood the Privacy Statement contained in this application form

Applicant's name (print)

Applicant's signature

Date

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

Day Month Year

If we find out later that any information you give us is not true, or that you knew information you should have told us and did not tell us, we may stop paying your benefit. You might need to pay money back. In some cases you could even be prosecuted.

Please use the Checklist (page 3) to help you make sure you bring all the documents you need to your meeting with us.

