

Australian Government

Family Assistance Office

Notes for Child Care Benefit for registered care

Purpose of these notes	These notes provide information for people using registered child care who want to claim Child Care Benefit.
	With registered care, you are entitled to the registered care rate of Child Care Benefit for maximum of 50 hours of care per child per week, but you are not entitled to the Child Care Rebate.
	Note: You can only claim Child Care Benefit for periods of child care that have already been used and paid for at the time of the claim.
Definition of a partner	For Family Assistance Office purposes a person is considered to be your partner if you and the person are living together, or usually live together, and are married, or in a registered relationship (opposite-sex or same-sex), or in a de facto relationship (opposite-sex or same-sex).
	The Family Assistance Office considers a person to be in a de facto relationship from the time they commence living with another person as a member of a couple.
For more information	Go to our website at www.familyassist.gov.au or call the Family Assistance Office on 13 6150 or visit your local Family Assistance Office.
	To speak to the Family Assistance Office in languages other than English, call 13 1202 .
	Note: Calls from your home phone to the Family Assistance Office 13 numbers from anywhere in Australia are charged at a fixed rate. That rate may vary from the price of a local call and may also vary between telephone service providers. Calls to 1800 numbers from your home phone are free. Calls from public and mobile phones may be timed and charged at a higher rate.
	The Family Assistance Office is located in all Medicare offices and Centrelink Customer Service Centres.
If you have a hearing or speech impairment	TTY service Freecall [™] 1800 810 586 . A TTY phone is required to use this service.
Interpreters and translations	If you need an interpreter or translation of any documents for Family Assistance Office business, we will arrange this for you free of charge.

Child Care Benefit is assistance to help with the cost of child care. Child Care Benefit can be claimed in different ways depending on the type of child care you use. It is not available through the tax system.

Child Care Benefit is a payment to help families who use:

- registered child care, and/or
- approved child care.

Registered care is child care provided by nannies, grandparents, relatives or friends who are registered with the Family Assistance Office. In some circumstances it can also include child care provided by individuals in private pre-schools, kindergartens and some outside school hours care services. Your child's carer must be registered with the Family Assistance Office for you to claim Child Care Benefit. Your child carer can contact the Family Assistance Office on **13 6150** for information on how to become registered.

For families using registered care — You can only claim Child Care Benefit by completing this form and lodging it with your child care receipts at the Family Assistance Office within
12 months from the date care was provided. For example, if you use child care on
11 August 2011, you must lodge your claim by 11 August 2012.

You cannot be paid for any sessions of care for your child if you are the registered child care provider.

Approved child care is care provided by a service provider that has been approved to receive Child Care Benefit payments on behalf of eligible families.

For families using approved care — please do not use this form.

For information about the different ways you can claim Child Care Benefit for approved care, call the Family Assistance Office on **13 6150**. To find an approved child care provider in your area search the website at **www.mychild.gov.au** or call the Child Care Access Hotline on **1800 670 305 (TTY 1800 639 327)**.

For families using registered care AND approved care — You will need to claim Child Care Benefit separately for each type of care.

We also need to know if each child attends school. For Child Care Benefit purposes, **a school child** is a child who attends primary or secondary school or is on a break from school (for example, school holidays) and will be returning to primary or secondary school after that break. For Child Care Benefit purposes, children who are in the following classes are regarded as being in the first year of primary school:

- kindergarten in NSW or ACT
- transition in NT
- preparatory or year 1 in QLD
- preparatory in VIC and TAS

• pre-primary in WA

• reception in SA

Once you have completed this form and lodged it with your child care receipts*, the Family Assistance Office will send your payment to your nominated account. The **Family Assistance Office** does not make cash payments.

- dates when the care commenced and ended
- the hours of care, and
- the amount paid for each child in care.

^{*} Child care receipts should include:

[•] the service provider's Customer Reference Number

	To be eligible for Child Care Benefit if you are using a registered child care provider, you (and your partner) must satisfy the work, training or study test at some time during the week (Monday to Sunday) in which the care was provided.
	For example, if you had your child in registered care on Thursday 1 July 2011, you (and your partner) must satisfy the work, training or study test at any time during the week beginning Monday 28 June and ending Sunday 4 July.
You satisfy the work, training or study test	• you (OR your partner) get Carer Allowance for a child (Carer Allowance is a Centrelink payment that provides assistance to parents and guardians who care for a child with a disability)
if:	 OR you (AND your partner) meet the eligibility requirements listed below at some time during the week in which the care was provided.
Eligibility requirements	<i>Working</i> Working includes: paid full time, part time or casual work, self-employment, paid leave, unpaid sick leave, Parental Leave Pay, paid or unpaid maternity leave, and setting up a business.
	<i>Voluntary work</i> Voluntary work for 15 hours or more per week, or any voluntary or unpaid work to improve your work skills.
	Looking for work You are actively looking for suitable paid employment for the entire period, unless you are otherwise meeting Activity Test requirements while you are claiming a payment from Centrelink that requires an Activity Agreement such as Newstart Allowance, Youth Allowance or Parenting Payment.
	Studying/training Studying and training includes undertaking a course to increase your job prospects, attending a school, university or college, and being on a semester break.
	<i>Other circumstances</i> Have a disability, caring for an adult or child who has a disability, are outside Australia or in prison.
	 For example To be eligible for up to 50 hours of Child Care Benefit per week for a child in registered care, a couple could be (and these are not the only possibilities): both working
	 one working and one studying
	 one with a disability and the other partner working
	 one with a disability and the other partner caring for that person
	 one studying and the other partner caring for a child with a disability
	 one receiving Carer Allowance for a child.
	For approved care , the work, training or study test requirements are different.
	Please note: If you have a partner, you and your partner:
	 do not have to be in the same category, and do not have to satisfy the work, training or study test on the same day—so long as you both satisfy the work, training or study test at some time during the week in which the care was provided.
	If you have a partner, only one of you can satisfy the work, training or study test under the other circumstances eligibility requirement.
	Remember, if you have a partner then both of you must meet any one of these requirements to claim Child Care Benefit for registered care, unless one of you receives Carer Allowance for a child.

Commencing or returning to work

If you (or your partner):

- are the lower income earner in a couple, and
- commence or return to work for the FIRST time after the birth of a child or caring for a child who has come into your care,

you may be entitled to the maximum rate of Family Tax Benefit Part B for the period during the financial year before you commenced or returned to work and in which you were not in receipt of Parental Leave Pay. Family Tax Benefit Part B is not payable to families if the higher earner's income is more than \$150,000 for the financial year or for any period in which the family was in receipt of Parental Leave Pay.

For more information on returning to work, go to our website at **www.familyassist.gov.au** or call the Family Assistance Office on **13 6150** between 8.00 am and 8.00 pm (local time) Monday to Friday or visit your local Family Assistance Office.

To claim **Child Care Benefit** for any child who is under **7 years old**, you may need to prove that your child's immunisation is up-to-date or that you have an approved exemption for your child.

If the child's immunisation is up-to-date, the easiest way to prove this is to provide the number on the current Medicare card the child is listed on.

If you do not want to provide the current Medicare number or you do not know it, and you do not have an approved exemption, you can provide:

- an '*Immunisation History form*' completed by your doctor or other recognised immunisation provider, or
- an 'Immunisation History statement' from the Australian Childhood Immunisation Register.

Approved exemptions

Your child is exempt from the immunisation requirement in the following circumstances:

- your child cannot be given a particular scheduled vaccine due to a temporary or permanent medical condition—your child's doctor or a recognised immunisation provider will need to complete a '**Medical Contraindication form**' or provide a letter stating that your child cannot be immunised.
- your child's family holds a personal, philosophical or religious belief that your child should not be immunised—your child's doctor, or a recognised immunisation provider will need to complete a 'Conscientious Objection form' or provide a letter stating that the benefits and risks of immunisation have been explained to you and because of your beliefs you do not want your child immunised. You will need to sign the form or letter completed by the doctor or recognised immunisation provider.
- your child has a natural immunity to a disease or a vaccine is temporarily unavailable—you will need a **letter from your child's doctor** explaining the reasons.
- your child is in a category specified by the Minister for the Department of School Education, Early Childhood and Youth as being exempt from the requirement to be immunised. Members of the Church of Christ, Scientist are included in this category and you will need a letter from an official of the church stating that you (and/or your partner) are practising member(s) of this church.
- your child has been immunised outside Australia—you will need a letter from your child's doctor or recognised immunisation provider explaining that the same level of immunisation has been provided to your child as outlined by the Australian vaccination schedule or is on a catch up schedule.

Other health assistance

Australian Childhood Immunisation Register

The Australian Childhood Immunisation Register (the Immunisation Register) is a national register that records details of vaccinations given to child(ren) under 7 years of age who live in Australia, helping parents ensure that their child(ren) are fully immunised.

Children under 7 years of age who are enrolled in Medicare are automatically included on the Immunisation Register. Children who are not eligible to enrol in Medicare will be added when a doctor or immunisation provider sends the details of a vaccination to the Immunisation Register.

For information

Email acir@medicareaustralia.gov.au or go to www.medicareaustralia.gov.au or call Freecall™ 1800 653 809.

For more information about health assistance

Go to **www.medicareaustralia.gov.au** or call Medicare Australia on the numbers below:

- Australian Childhood Immunisation Register 1800 653 809
- Medicare Safety Net 132 011
- Pharmaceutical Benefits Scheme Safety Net 1800 020 613

You may also be eligible for assistance under the Medicare Teen Dental Plan. For information, call Medicare Australia on **132 011**.

Privacy and your personal information

Personal information is protected by law including the *Privacy Act 1988*. The authority to collect this information is contained in family assistance law.

The information you provide on this form will be used to determine your eligibility for, and provide payments and services to you, and where relevant, to third parties (for example, other family members). Certain information may also be used to detect or prevent fraud and/or recover overpayments.

The Family Assistance Office may give some or all of your information to the Department of Human Services, the Department of Education, Employment and Workplace Relations and partner agencies including Centrelink, and Medicare Australia for the purposes of assessing, delivering and monitoring of these payments and services provided to you.

The Family Assistance Office may disclose limited information (for example, income) about you to other parties when your circumstances affect their entitlement to payments and services.

In order to collect relevant immigration records, the Family Assistance Office will disclose information needed to identify you, and where applicable your partner and child(ren), to the Department of Immigration & Citizenship.

Limited personal information may be used to conduct customer research run by the Family Assistance Office, its partner agencies, the Department of Education, Employment and Workplace Relations, the Department of Human Services or by research organisations on their behalf. Your participation in customer research is valued, however, if you do not wish to take part, please call the Family Assistance Office on **13 6150**.

The Family Assistance Office can give your information to other persons, bodies or agencies without your permission in circumstances where Commonwealth legislation requires or authorises the disclosure. For example, the Family Assistance Office usually gives some or all your information about income and taxation matters to the Australian Taxation Office and the Child Support Agency for their use.

For more information about privacy, go to our website at **www.familyassist.gov.au** or call the Family Assistance Office on **13 6150**.

Online Services offers you a quick and easy way to do your business with the Family Assistance Office by using phone or Online Services options at a time that is convenient to you.

Online Services

Registration for Online Services is easy and only takes a few minutes. Register by clicking the Online Services tab at **www.familyassist.gov.au** When you register, you will be given a Customer Access Number (CAN) and asked to choose a password.

Once online, you can:

- make a claim for Family Tax Benefit, and Child Care Benefit for approved care
- · update your income estimate and see how it affects your payments
- · request an advance payment of Family Tax Benefit
- · see your Family Tax Benefit advance details
- · check when you will be paid by the Family Assistance Office
- · access a range of other services.

Phone Online Services

Online Services by phone is available 24 hours, 7 days a week. Once registered you will be given a PIN and can phone **13 6240** to access a number of options including:

- · hear your income estimate
- · hear your Family Tax Benefit advance details
- hear your payment history.

Customer support for this number is available from 8.00 am to 8.00 pm (local time) Monday to Friday except national or state public holidays.

For more information about Online Services or availability times, go to our website at **www.familyassist.gov.au** or call the Family Assistance Office on **13 6150**.



Australian Government

Family Assistance Office

Claim for Child Care Benefit for registered care

When to use this form	Use this form if you are using registered child care and want to claim Child Care Benefit.
	Note: You can only claim Child Care Benefit for periods of child care that have already been used and paid for at the time of the claim.
	 You must provide the original receipts from your registered carer with this claim to confirm how much care you have used and paid for.
	 The 'period you are claiming for' is the period covered by the receipts you provide with this form.
	• You can only claim Child Care Benefit by completing this form and lodging it with your child care receipts at the Family Assistance Office within 12 months of the date care was provided.
	 DO NOT use this form to claim Child Care Benefit for approved care.
	With registered care, you are entitled to the registered care rate of Child Care Benefit for maximum of 50 hours of care per child per week, but you are not entitled to the Child Care Rebate.
For more information	Go to our website at www.familyassist.gov.au or call the Family Assistance Office on 13 6150 or visit your local Family Assistance Office.
	To speak to the Family Assistance Office in languages other than English, call 13 1202 .
	Note: Calls from your home phone to Centrelink 13 numbers from anywhere in Australia are charged at a fixed rate. That rate may vary from the price of a local call and may also vary between telephone service providers. Calls from public and mobile phones may be timed and charged at a higher rate.
lf you have a hearing or speech impairment	TTY service Freecall [™] 1800 810 586 . A TTY phone is required to use this service.
Interpreters and translations	If you need an interpreter or translation of any documents for Family Assistance Office business, we will arrange this for you free of charge.
What else you will need to provide	This form tells you which other documents you need to provide to support your claim. Please remember that we need to see original documents (please do not provide photocopies).
Filling in this form	Please use black or blue pen.
-	Mark boxes like this 🗌 with a 🗸 or 🗙.
	Where you see a box like this \bigcirc Go to 5 skip to the question number shown. You do not need to answer the questions in between.

Returning the form(s)

Check that you have answered all the questions you need to answer, and that you have signed and dated this form.

Return your completed claim form (and required documents) to the Family Assistance Office in person or by post, within 12 months from the date the care was provided.

If you return required documents (and your claim form):

- by post we will sight and record your documents, which may include copying, and return the originals to you by registered post.
- in person we will sight and record your documents, which may include copying, and return the originals to you.

You can return your form to any Family Assistance Office, located in all Medicare offices and Centrelink Customer Service Centres.

You		Your partner (if you have one)
Do you need an interpreter when dealing with the Family Assistance Office?	1	Does your partner need an interpreter when dealing with the Family Assistance Office?
This includes an interpreter for people who have a hearing or speech impairment.		This includes an interpreter for people who have a hearing or speech impairment.
No Go to 3		No Go to 3
Yes 🕞 Go to next question		Yes 🕞 Go to next question
What is your preferred spoken language?	2	What is your partner's preferred spoken language?
What is your preferred written language?	3	What is your partner's preferred written language?
Your name	4	Your partner's name
Mr Mrs Miss Ms Other		Mr Mrs Miss Ms Other
Family name		Family name
First given name		First given name
Second given name		Second given name
Have you ever used or been known by any other name	5	Has your partner ever used or been known by any other name
(e.g. name at birth, maiden name, previous married name, Aboriginal or tribal name, alias, adoptive name, foster name)?		(e.g. name at birth, maiden name, previous married name, Aboriginal or tribal name, alias, adoptive name, foster name)?
No 🚺 Go to next question		No 🕖 Go to next question
Yes 🕞 Give details below		Yes 🕞 Give details below
1 Other name		1 Other name
Turna of name (a g name at hirth)		Tune of name (o g, name at birth)
Type of name (e.g. name at birth)		Type of name (e.g. name at birth)
2 Other name		2 Other name
Type of name (e.g. maiden name)		Type of name (e.g. maiden name)
If you have more than 2 other names, attach a separate sheet		If your partner has more than 2 other names, attach a separate sheet with details.

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	You		Your partner (if you have one)
6	Your sex	6	Your partner's sex
	Male		
	Female		Female
7	Your date of birth	7	Your partner's date of birth
	/ /		/ /
8	Your Customer Reference Number (if known)	8	Your partner's Customer Reference Number (if known)
9	Your permanent address	9	Your partner's permanent address (if different to yours)
	Postcode		Postcode
	Postcode		Postcode
10	Postcode Your postal address (if different to above)	10	Postcode Your partner's postal address (if different to above)
10		10	
10		10	
10		10	
10	Your postal address (if different to above)	10	Your partner's postal address (if different to above)
10	Your postal address (if different to above)		Your partner's postal address (if different to above)
	Your postal address (if different to above) Postcode		Your partner's postal address (if different to above) Postcode
	Your postal address (if different to above) Postcode Your contact details		Your partner's postal address (if different to above) Postcode Your partner's contact details
	Your postal address (if different to above) Postcode Your contact details Home phone number ()		Your partner's postal address (if different to above) Postcode Your partner's contact details Home phone number ()
	Your postal address (if different to above) Postcode Your contact details Home phone number Is this a silent number?		Your partner's postal address (if different to above) Postcode Your partner's contact details Home phone number () Is this a silent number? No Yes
	Your postal address (if different to above) Postcode Your contact details Home phone number () Is this a silent number? No Yes Mobile phone number		Your partner's postal address (if different to above) Postcode Your partner's contact details Home phone number () Is this a silent number? No Yes Mobile phone number
	Your postal address (if different to above) Postcode Your contact details Home phone number Is this a silent number? No Yes Mobile phone number ()		Your partner's postal address (if different to above) Postcode Your partner's contact details Home phone number () Is this a silent number? No Yes Mobile phone number () Vork phone number ()

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You

12	Questions 12 and 13 are optional and will not affect your payment. If you do answer, the information will help us to
	continue to improve services to Aboriginal, Torres Strait and Australian South Sea Islander peoples.

Australian South Sea Islanders are the descendents of Pacific Islander labourers brought from the Western Pacific in the 19th Century.

Are you of Aboriginal or Torres Strait Islander origin?

If you are of both Aboriginal and Torres Strait Islander origin, please tick both 'Yes' boxes.



13 Are you of Australian South Sea Islander origin?

No	
Yes	

Your partner (if you have one)

12 Questions 12 and 13 are optional and will not affect your payment. If your partner does answer, the information will help us to continue to improve services to Aboriginal, Torres Strait and Australian South Sea Islander peoples. Australian South Sea Islanders are the descendents of Pacific Islander labourers brought from the Western Pacific in the 19th Century.

Is your partner of Aboriginal or Torres Strait Islander origin? If your partner is of both Aboriginal and Torres Strait Islander origin, please tick both 'Yes' boxes.



13 Is your partner of Australian South Sea Islander origin?

No	
Yes	

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P	Please read this before answering the following question				
	The Family Assistance Office recognises both opposite-sex and same-sex relationships. This includes relationships registered under state or territory law. Select ONE option below that best describes your current relationship status.				
۷	Vhat is your CURRENT relation	nship	status?		
Ν	Narried		Date of marriage		
			/ /		
			Go to next question		
F	legistered relationship		Date registered		
	opposite-sex or same-sex elationship registered under		/ /		
	state or territory laws)		Go to next question		
(Partnered living together in an opposite-		Date you started living with a partner		
sex or same-sex relationship, including de facto)		/ /			
	с ,		Go to next question		
S	Separated		Date of last separation		
	previously lived with an opposi ex or same-sex partner, includ		/ /		
İ	n a marriage, registered or le facto relationship)	ing	Go to 16		
C	Divorced		Date of divorce		
			/ /		
			Go to 16		
V	Vidowed		Date of partner's death		
	previously partnered with an pposite-sex or same-sex parti	ner	/ /		
İ	ncluding in a marriage, register or de facto relationship)		Go to 16		
	lever married or lived vith a partner		Go to 16		
	If none of the above describes please call us on 13 6150 .	your	current relationship status,		

15 Do you give permission for your partner to discuss your payments with us?

You can change this authority at any time

No	
Yes	

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	You		Your partner (if you have one)
16	Please read this before answering the question	16	Please read this before answering the question
	'Permanently' means you normally live in Australia on a long- term basis. Holidays or short trips outside Australia would not affect this.		'Permanently' means your partner normally lives in Australia on a long-term basis. Holidays or short trips outside Australia would not affect this.
	Are you living in Australia permanently?		Is your partner living in Australia permanently?
	No Go to next question		No Go to next question
	Yes Go to 18		Yes Go to 18
17	Are you an Australian Government Sponsored Student?	17	Is your partner an Australian Government Sponsored Student?
	No		No
	Yes		Yes
18	Have you lived or travelled outside Australia since 1 September 1994, including short trips and holidays?	18	Has your partner lived or travelled outside Australia since 1 September 1994, including short trips and holidays?
	The answer to this question may enable the Family Assistance Office to access electronic records held by Australia's immigration department since 1 September 1994. These records will help us to verify your Australian residence on your behalf to assist with your claim.		The answer to this question may enable the Family Assistance Office to access electronic records held by Australia's immigration department since 1 September 1994. These records will help us to verify your partner's Australian residence on their behalf to assist with your claim.
	No 🕞 Go to next question		No 🕞 Go to next question
	Yes Dive details below		Yes Give details below
	Passport number		Passport number
	Country of issue		Country of issue
10	An un Australian citizen urbe une bere in Australia)	10	la unu nada an an Australian sitisan suka una hawain Australia (
19	Are you an Australian citizen who was born in Australia ?	19	Is your partner an Australian citizen who was born in Australia ?
	No You will need to provide proof of your Australian residence status (e.g. citizenship papers, passport or other documentation). Go to next question		No You will need to provide proof of your partner's Australian residence status (e.g. citizenship papers, passport or other documentation). Go to next question
	Yes Go to 26		Yes Go to 26
20	What is your country of birth?	20	What is your partner's country of birth?
21	When did you start living in Australia?	21	When did your partner start living in Australia?
	/ /		/ /
ว ว	What is your country of citizenship?	ე ე	What is your partner's country of sitizanship?
22	What is your country of citizenship?	22	What is your partner's country of citizenship?
	Australia Date granted		Australia Date granted
	/ / Go to 26		/ / Go to 26
	Other Decountry of citizenship		Other Decountry of citizenship

	You				
23	What type of visa did you arrive	e on?			
	New Zealand passport (Special Category Visa)	to to 25			
	Permanent Go to next question				
	Temporary Go to next question				
	Unknown (e.g. arrived b G on parent's passport)	to to 25			
24	Your visa details on arrival				
	Visa sub class	Date visa granted			
		/ /			
25	Has your visa changed since yo	ou arrived in Australia?			
	Yes Current visa details				
	Visa sub class	Date visa granted			
		/ /			

Your partner (if you have one)

23 What is your partner's current type of visa?

New Zealand passport > Go to 26 (Special Category Visa)	
Permanent Defined to next ques	tion
Temporary 🔛 Go to next ques	tion
Unknown (e.g. arrived b Go to 26 on parent's passport)	

24 Your partner's current visa details

Visa sub class	Date visa granted			
	/ /			

Account details

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26	Please read this before answering the question					
	If you are currently receiving Family Tax Benefit payments from us and you provide different bank account details for Child Care Benefit, then all Family Tax Benefit payments will be directed to this new account.					
	Where do you want your payment made?					
	The bank, building society or credit union account must be in your name. A joint account is acceptable. It cannot be in a child's name unless you are the signatory or trustee.					
	Name of bank, building society or credit union					
	Branch where your account is held					
	Branch number (BSB)					
	Account number (this may not be your card number)					
	Account held in the name(s) of					

27 Please give details of each of the children you are claiming Child Care Benefit for.

Care Benefit for.					
Ø	? You will need to provide proof of birth for any child where proof has not been provided to the Family Assistance Office, for example, Birth Certificate or extract, adoption papers or other documents issued by the government.				
Child	11				
Child's	s family name				
Child's	s first given name				
Child's	s second given name				
Date o	of birth Sex				
	/ / Male Female				
When	did this child enter your care?				
Doog	this child attend school?				
	includes children who are on a break from school who				
	e attending school after that break, e.g. school holidays.				
No	Yes				
	is child start school during the period you are ng for?				
No	Yes Date started				
	/ /				
Child	12				
	s family name				
Child's	s first given name				
Child's	s second given name				
Date o	of birth Sex				
	/ / Male Female				
When	did this child enter your care?				
	this child attend school? ncludes children who are on a break from school who				
will be attending school after that break, e.g. school holidays.					
No	Yes				
Did this child start school during the period you are claiming for?					
No Yes Date started					
/ /					

If you are claiming Child Care Benefit for more than 2 children, attach a separate sheet with details.

28	Please read this before answering the question	21	Place read this he	fore answering the gu	ostion	
20	To claim Child Care Benefit for any child who is under 7 years of age, you need to prove that your child's immunisation is	Please read 'About	Please read this before answering the question Please read 'About the work, training or study test' on Page 3 of the Notes Booklet before you complete this question.			
	up-to-date or that you have an approved exemption for that child. The easiest way to do this is to provide details of the current Medicare card your child is listed on.		Were there any periods when your children attended register care that you (AND your partner) did NOT satisfy the work, training or study test?			
	Are any of the children in this form under 7 years of age ? No Go to 31 Yes Go to next question		registered car	vide the original receipts rer with this claim to con e used and paid for.		
29	Have you already provided your child's current Medicare card		No Go to 33 Yes Go to next of	question		
30	details to the Family Assistance Office? No Go to next question Yes Go to 31 Can you provide details of the current Medicare card that your	32	(Monday to Sunday) partner) did NOT sat Do not write the date	eceipts and write the da you are claiming for tha t isfy the work, training o es the actual care was p t (Monday) and end (Sur	t you (and your or study test. provided. Only write	
	child(ren) is listed on, so that we can check their immunisation status?		you (and your partne study test.	r), did NOT satisfy the		
	number OR one of the documents below that confirms each child's immunisation is up-to-		You from (Monday)	to (Sunday)]	
	date, or that they have an approved exemption. Your child's Personal Health Record is NOT acceptable proof of Immunisation for Child			/	/	
	Care Benefit purposes.		/ /	/	/	
	<i>Tick whichever applies</i> My child(ren) is not yet listed on a Medicare card.		/ /	/	/	
	I will provide the card number when it has been issued.		/ /	/	/	
	An Immunisation History Statement from the Australian Childhood Immunisation Register		/ /	/	/	
	An Immunisation History form from a doctor or recognised immunisation provider		/ /	/	/	
	A letter from a doctor or recognised immunisation provider			/	/	
	A Medical Contraindication form from a doctor or recognised immunisation provider				/	
	A Conscientious Objection form from a doctor or recognised immunisation provider			/	/	
	A letter from an official of the Church of Christ,			/	/	
	Scientist stating that you (and/or your partner) are practising member(s) of this church		/ /	/	/	
	Yes Medicare card number		/ /	/	/	
			/ /	/	/	
	Child's Medicare reference number		/ /	/	/	
	First given name and second initial		/ /	/	/	
			If YOU have more da	ates, attach a separate	sheet with details.	

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Your partner							
from (Monday)	to (Sunday)						
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If YOUR PARTNER has more dates, attach a separate sheet with details.

33 Which documents have you included with this form?

If you are unsure, check the question to see if you should attach the documents.

You must provide original documents, for Proof of Identity, Proof of Residence and receipts for child care. Copies of all other documents requested are acceptable.

> Citizen papers, passport or other documents (if you answered No at question 19)

Proof of birth for any child where proof has not been provided to the Family Assistance Office (at question 27)

Provide your Medicare card number or documents that [confirms each child's immunisation is up-to-date, or that they have an approved exemption (at question 30)

Provide the original receipts from your registered carer for periods of child care that have already been used and paid for at the time of the claim (at question 31)

34 Statement

I declare that:

- the information provided in this form is complete and correct.
- I have received the Notes Booklet which includes the privacy notice.
- I have attached my registered child care receipts to this form.
- the payment has been made for the child care for which I am claiming Child Care Benefit.

I understand that:

- giving false or misleading information is a serious offence.
- the Family Assistance Office can make relevant enguiries to ensure I receive my correct entitlement.
- any overpayment of family assistance will need to be paid back and that some or all of an overpayment may be recovered from future family assistance payment(s), including end of year supplement payment(s).

Your signature

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Date						
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