

# Child Maintenance Bonus

**jobcentreplus**

Part of the Department  
for Work and Pensions

## When to claim

Claim your Child Maintenance Bonus **as soon as you know that one of the following is going to happen**

- you or your partner start or will start work 14 days of the end of your claim for Income Support or income-based Jobseeker's Allowance
- you stop getting Income Support or income-based Jobseeker's Allowance because your earnings or hours increase
- you stop getting Income Support or income-based Jobseeker's Allowance because your partner's earnings or hours increase
- you or your partner stop claiming Income Support for any reason within 12 weeks of you reaching age 60, or stop claiming income-based Jobseeker's Allowance for any reason within 12 weeks of you reaching pension age.

If you reach age 60 while your partner is getting Income Support, or reach pension age while your partner is getting income-based Jobseeker's Allowance, we will send you the Child Maintenance Bonus automatically. You will not have to claim.

We use *partner* to mean

- a person you are married to or a person you live with as if you are married to them, or
- a civil partner or a person you live with as if you are civil partners.

## How to claim

- Please answer all the questions on this form that apply to you.
- Return it to the office which deals with your Income Support or Jobseeker's Allowance as soon as possible.
- You may lose your bonus if you do not claim it within 28 days of your benefit or allowance ending.
- We will pay any Child Maintenance Bonus you are entitled to by cheque. If you need someone to go to the Post Office® for you, please tell us about this.

Send us the completed form **and** any written proof we ask for. We cannot pay your bonus if you do not provide all the information we need.

## The proof we need

<b>A new job</b>	The date the job started, the weekly hours and net pay
<b>Increased hours</b>	The new hours and the date of the increase
<b>Increased pay</b>	The new pay and the date it was received

Please ask the employer to fill in the **Employer's declaration** on this form if you do not have any other written proof. If you are self-employed, write *self* in the **Employer's name** box. We will get in touch with you for more information. Send this completed form and your written proof to the office that deals with your Income Support or Jobseeker's Allowance.

## Part 1 About you

**Surname**

Mr/Mrs/Miss/Ms

**Other names**

**Any other surnames you have been known by**

**Date of birth**

**National Insurance (NI) number**

You can get this from your NI number card, letters about your benefit or payslips.

**Address**

**Daytime phone number**

**What benefit or allowance have you been claiming?**

Tick a box or write the name of the benefit, allowance or training allowance.

Letters    Numbers    Letter

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Postcode

Code	Number
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Income Support

Jobseeker's Allowance

Other

## Part 2 About your partner

**Their surname**

Mr/Mrs/Miss/Ms

**Their other names**

**Any other surnames they have been known by**

**Their date of birth**

**National Insurance (NI) number**

You can get this from their NI number card, letters about their benefit or payslips.

**Their address**

If different from yours

**Daytime phone number**

**What benefit or allowance have they been claiming?**

Tick a box or write the name of the benefit, allowance or training allowance.

Letters    Numbers    Letter

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Postcode

Code	Number
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Income Support

Jobseeker's Allowance

Other



## Part 6 **Employer's declaration**

**Employee's name**

**New employee**

**Start date**

**Hours a week**

**Net pay**

**Existing employee**

The employee has told us that their hours or pay have just increased or will increase soon. Please tell us about the increase.

**Hours a week**  
after the increase

**Net pay**  
after the increase

**Date of the increase**

**First payday affected**

**Employer's details**

**Employer's name**

**Your position in the company**

**Your name in BLOCK CAPITALS**

**Signature**

**Date**

**Employer's official stamp**