Social Welfare Services BSCFA 1 Data Classification R



Application form for Back to School Clothing and Footwear Allowance 2024

What is Back to School Clothing and Footwear Allowance?

The Back to School Clothing and Footwear Allowance is a once-off, means-tested payment. It is aimed at helping families with the extra costs of clothing and footwear, when children start school each autumn. The scheme is open from 1 June to 30 September each year.

How do I qualify for Back to School Clothing and Footwear Allowance?

To qualify for Back to School Clothing and Footwear Allowance, you must meet all the following conditions:

- You must be in receipt of a qualifying social protection payment or participating in an approved employment, education or training support scheme;
- You must be in receipt of an increase for a qualified child (IQC) in respect of each child for whom the allowance is being claimed except in certain circumstances;
- Each child being claimed for must be aged between 4 and 17 years of age, or be aged between 18 and 22 and returning to second-level education in the autumn;
- The assessable income for your household must be within a set income limit;
- You and each child in respect of whom the allowance is claimed must be resident in the State.

How do I apply?

The quickest way is to apply online at **MyWelfare.ie.** If you are unable to apply online, please send this completed application form to:

Back to School Clothing and

Footwear Allowance Section

Social Welfare Services Department of Social Protection College Road Sligo F91 T384

How to complete this application form?

This application form must be completed by the person in receipt of the qualifying payment. There is an example on the back of this page that can be used as a guide to fill in this form.

- Write with a **black pen**.
- Use capital letters and place an X in the relevant boxes.
- Answer all questions that apply to you, leave blank any that don't apply.
- Sign and date the declaration in Part 6.

How can I get help and further information?

If you have any difficulties applying on **MyWelfare.ie**, or completing this form, please contact the Back to School Clothing and Footwear Allowance team on **0818 111 113** or **071 919 3318**. You can also email us at **bscfa@welfare.ie** and we will help you.

For more information visit www.gov.ie/bscfa.

How to fill in this form

To help us process your application, write letters and numbers clearly and use one box for each. Please see examples below.

Applicant's details

1. PPS Number:	1	2	3	4	5	6	7	Т	А											
 Title, insert an X or specify: 	Mr		N	1s [Х	M	rs [(Oth	er							
3. Surname:	М	U	R	Ρ	Н	Y														
4. First names:	М	А	U	R	Е	Е	Ν													
5. Address:	1		Ν	Е	W		S	Т	R	Е	Е	Т								
	0	L	D		Т	0	W	Ν												
	D	0	Ν	Е	G	А	L		Т	0	W	Ν								
County	D	0	Ν	Е	G	A	L				Ei	rco	de	С	1	5	A	9	6	V
6. Phone number:	0	8	8	1	2	3	4	5	6	7										
7. Date of birth:	2 D	8 D) 2 VI N		1 Y	9 Y	7 Y	0 Y											

SAMPLE

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Application form for Back to School Clothing and Footwear Allowance 2024

Part 1	Applicant's details
1. PPS Number:	
2. Title, insert an X or specify:	Mr Ms Mrs Other
3. Surname:	
4. First names:	
5. Address:	
County	Eircode
6. Phone number:	
7. Date of birth:	D D M M Y Y Y Y
8. Are you?	SingleCohabitingMarriedIn a Civil PartnershipSeparatedA surviving Civil PartnerDivorcedA former Civil Partner, meaning you were in a Civil Partnership that has since been dissolved.

9. From what date did you begin the partnership in question 8?



Details of your spouse, civil partner or cohabitant

Note: If you have a spouse, civil partner or cohabitant, they will be referred to as your partner for the rest of this form to make it easier for you to fill out.

10. PPS Number:														
11. Surname:														
12. First names:														
13. Date of birth:	D	D	M	IVI	Y	Y	Y	Y]					

Part 3 Details of children you are applying for

Please record the details of children living with you in the table below. Please include all children up to 17 years old and any children over 18 and under 22, if in full-time education. For any children aged 18 or over, please place an **X** in the table below if they are returning to full-time second-level education in a recognised secondary school in the autumn. **Third level students are not eligible for the Back to School Clothing and Footwear Allowance.**

Name	PP	PPS Number						Date of birth	Relationship to you	Second-level education	

Details of income for yourself and your spouse, civil partner or cohabitant

If you have been approved for the 2024 Back to School Clothing and Footwear Allowance payment and wish to apply for children aged 18 and over, you do not need to complete **Part 4**.

14. Are you or your partner employed at present?

		Yo	bu	Partner				
	<u> </u>	′es	No	Yes	No No			
			lease state:					
Employer's name:								
Is this a Community Employment, Rural Social or a Tús scheme?	Y	′es	No No	Yes	🔲 No			
How much is the gross weekly income from current employment?	€			€				
How much is your or your partner's weekly employee PRSI deduction, if applicable?	€			€				

Note: If you or your partner have more than one employer, a separate sheet of paper can be used to provide details as above.

15. Are you or your partner self-employed, farming or getting income from rental of land?

		You	Partner							
	Yes	No No	Yes	No No						
	If yes, please state:									
Nature of self-employment:										
Annual net profit per most recent Revenue assessment:	€		€							
PRSI paid:	€		€							

Note: If you or your partner have more than one self-employment, a separate sheet of paper can be used to provide details as above.

Part 4 continued

Details of income for yourself and your spouse, civil partner or cohabitant

16. Do you or your partner have savings or accounts in a Bank, Online Bank, Post Office, Building Society, Credit Union or any other financial institution in Ireland or another country?

	You				Partner					
		Yes		No		Yes	No No			
		If yes, please state:								
Financial institution and branch name:										
Current balance:	€				€					
Account number:										
Names of account holders:										

Note: If you or your partner have any other accounts, a separate sheet of paper can be used to provide details as above.

17. Do you or your partner have property apart from your home?

	Y	<i>ï</i> ou	Partner				
	Yes	No No	Yes	No No			
		lf yes, pl	ease state:				
Address of property:							
Country:							
Current market value:	€		€				
What is the outstanding mortgage, if applicable?	€		€				

Note: If you or your partner have any other properties, a separate sheet of paper can be used to provide details as above.

Part 4 continued

Details of income for yourself and your spouse, civil partner or cohabitant

18. Do you or your partner own any investments?

		You		Partner				
	Ye:	s 🗌	No	Yes	No			
			lf yes , p	lease state:				
Type of investment:								
Name of investment holder:								
Reference number:								
Current total value of investment:	€			€				

Note: If you or your partner have any other investments, a separate sheet of paper can be used to provide details as above.

19. Do you or your partner own any shares?

	You				Partner				
		Yes		0		Yes	No		
Company name:									
Number of shares:									
PRSI paid:	€				€				

Note: If you or your partner have other shares, a separate sheet of paper can be used to provide details as above.

20. Do you or your partner get any foreign social security payment?

	You				Partner				
		Yes	No		Yes	No			
Type of payment:									
Weekly amount:	€			€					

Note: If you or your partner have other foreign social security payments, a separate sheet of paper can be used to give details.

Part 4 continued

Details of income for yourself and your spouse, civil partner or cohabitant

21. Do you or your partner have any other pension from Ireland or a pension from any other country?

	You				Partner				
		Yes	No			Yes	No No		
Type of payment:									
Pension paid by:									
Weekly amount:	€				€				

Notes: If you or your partner have any other pensions, a separate sheet of paper can be used to give details.

22. Do you or your partner have any other income?

	You	Partner
	Yes No	Yes No
Income source:		
Weekly amount:	€	€

Note: If you or your partner have any other income, a separate sheet of paper can be used to give details.

Your payment details

If you are already getting a payment from this department, your Back to School Clothing and Footwear Allowance will use the payment method of your current payment. If you are not already getting a payment from this department, you can get payment at your local Post Office or direct to your current, deposit or savings account in a financial institution.

Note: You must have a Social Welfare or Public Services Card to collect your payment at a Post Office.

Only complete one option below if you are not already getting a weekly payment from us.

Post Office													
Name:													
Address:													
County		Eircode											

Financial Institution

You will find the details requested below printed on statements from your financial institution.

Name of financial institution:										
Bank Identifier Code (BIC):										
International Bank Account Number (IBAN):										
Names of account holders:										
Name 1:										
Name 2 if any:										

Scheme Information

If you, your spouse, civil partner or cohabitant	You may be requested to submit
Have a child aged 18-22	Letter from School confirming they are in second-level education
Are an employee or are working on an Employment Scheme for example Community Employment	A payslip for a period between 1 June and 30 September
Are self-employed including farming	Most recent 4 page Notice of Assesment or copy of latest tax return filed on Revenue Online Service
Have rental income	Documentary evidence of this income
Own property other than your home	Evidence of current valuation and details of any outstanding mortgage
Have any other income	Documentary evidence of this income

Declaration

I declare that all the information I have given on this form is truthful, accurate and complete, and that I am legally resident and living permanently in the State. I understand that if any of the information I provide is untrue or misleading or if I fail to disclose any relevant information, I will be required to repay any benefit I receive from the department and that I may be prosecuted.

	Date:								
Signature, not capital letters.		D	D	Μ	Μ	Y	Y	Υ	Υ

Warning: If you make a false statement or withhold information, you may be prosecuted leading to a fine, a prison term or both.

Data Protection Statement

The Department of Social Protection administers Ireland's social protection system. Customers are required to provide personal data to determine eligibility for relevant payments and benefits. Personal data may be exchanged with other government departments and agencies where provided for by law. Our data protection policy is available at **www.gov.ie/dsp/privacystatement** or in hard copy.

Explanations and terms used in this form are intended as a guide only and are not a legal interpretation.

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