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| **Resource Toolkit** | Single Scheme Administration Project (Phase 1)  **Death of a Pensioner Resources** |
| **Resource Name** | Template Form - Child Pension Application Form |
| **Resource Reference** | SPS.DTH.DOP.TF.03 (Phase 1) |
| **Description** | This form may be used to issue to the Parent or Legal Guardian of an eligible Child Pension beneficiary. Where the Child is no longer in the care of his or her parent, step-parent or guardian, the form may issue directly to the surviving child |
| **Version** | V1.0 |

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| **PLEASE NOTE:** Administratorsmay accesslegislation, Circulars or Letters to Personnel Officers noted in this Procedure by accessing the Circulars & Legislation Section of the Single Scheme Website at [www.singlepensionscheme.gov.ie/circulars](http://www.singlepensionscheme.gov.ie/circulars) |

**Single Public Service Pension Scheme**

***Eligible Surviving Child Pension Application Form***

**What is the purpose of this form and who should complete it?**

This form issues where it is established that a deceased pensioner in receipt of a Single Scheme may be survived by an eligible child who may be entitled to receive a Child Pension. The information requested will assist in making a decision on eligibility for entitlement to a Child Pension. It is important that this form is read along with the enclosed Death of a Pensioner Information Note.

A separate application form should be completed in respect of each child who may be eligible to receive a Child Pension.

**What are the main eligibility criteria for a Child Pension benefit?**

To be eligible to apply for a Child Pension benefit, the Child concerned must:

1. Be under 16 years of age; or
2. Between 16 and 22 years of age and in full-time education/training; or
3. Be permanently physically or mentally incapacitated. The permanent incapacity must have occurred when the child met the criteria at (a) or (b) above; or
4. Have been wholly or mainly financially dependent on the deceased Single Scheme pensioner immediately prior to the pensioner’s death; and
5. Not be married, in a civil partnership or cohabiting with another person

**What documents should be provided as part of a Child Pension Benefit application?**

The following documents must be submitted with all applications:

1. Deceased’s original Death Certificate
2. Child’s original, long-form birth certificate
3. Where the child is aged between 16 and 22 years of age, a letter from the institution or person providing full-time education/training/instruction confirming this to be the case
4. Where the child is permanently incapacitated, a letter from his/her Doctor confirming when the incapacity first occurred, the nature of the incapacity and a statement that it is permanent in nature
5. Where there is no living parent or step-parent and the child applicant is under 18 or in the care of a Legal Guardian, the original court order granting guardianship rights to an individual, for the child applicant

**If original documents are not available or cannot be obtained, please contact the Pension Administrator for guidance.**

**What happens once a complete application is submitted?**

Once a complete application is submitted, the information gathered will be used to decide whether a surviving child is eligible to receive a Child Pension. If eligible, we will outline what the next steps are in order to set-up the pension. You should note that other documents/information may be requested once the claim application has been initially assessed.

**Payment of a Child Pension**

Where a Child Pension is payable to a child not in the care of a parent, step-parent or Legal Guardian, the pension shall be paid either to the child or to such other person as the employer may decide.

**Single Public Service Pension Scheme**

**Child Pension Application Form**

**A separate application form should be completed in respect**

**of each child who may be eligible to receive a Child Pension.**

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| **Section A: Child Applicant Category** | |
| **Eligibility for Child Pension:**  Surviving eligible child under 16 years of age 🞏  Surviving eligible child between 16 and 18 years of age 🞏**1**  Surviving eligible child between 18 and 22 years of age 🞏**1**  Surviving eligible child who is permanently incapacitated 🞏**2** | |
| **Section B: Child Personal Information**  ***(Please fully complete all fields below)*** | |
| |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |   **Child’s PPS Number**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   **Child’s Full Name**  **Child’s Date of Birth \_\_\_/\_\_\_/\_\_\_\_\_\_**  (DD/MM/YYYY)  **If this application is on behalf**  **of a surviving child who is**  **permanently incapacitated2**  **please outlined the date the**  **incapacity commenced: \_\_\_/\_\_\_/\_\_\_\_\_\_**  (DD/MM/YYYY)  **Child Relationship to deceased** 🞏 Blood-child 🞏 Step-child 🞏 Lawfully adopted   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   **Address for correspondence**  **and issue of pension remittance slips** | |
| **Section C: Deceased Pensioner Personal Information**  ***(Please fully complete all fields below)*** | |
| |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |   **Deceased’s PPS Number**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   **Deceased’s Full Name**  **Deceased’s Date of Birth \_\_\_/\_\_\_/\_\_\_\_\_\_**  (DD/MM/YYYY)  **Deceased’s Date of Death \_\_\_/\_\_\_/\_\_\_\_\_\_**  (DD/MM/YYYY) | |
| **Section D: Other Information**  ***(Please provide any other information below that you feel may be relevant to this application)*** | |
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| **Section E: Please complete this part of the form if the child applicant is under 18 years of age or is permanently incapacitated**  ***(Please fully complete all fields below)*** | |
| **I am the:**  🞏 Parent/Step-Parent/Legal Guardian of the child applicant who is in my care    🞏 Parent/Step-Parent/Legal Guardian of a permanently incapacitated child who is in my care    🞏 Surviving Child of the deceased, not in the care of a Parent/Step-Parent/Legal Guardian and over between 18 and 22 years of age  I declare that I have reviewed the Death of a Pensioner Information Note. I can confirm that the eligibility criteria for payment of a Child Pension Benefit is fully met. I declare that the information provided as part of this application is complete and correct.  **Print Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:** \_\_ /\_\_ /\_\_\_\_ (dd/mm/yyyy) | |
| **DOCUMENT CHECKLIST**  **Please note, all documents must be originals.** | |
| **Deceased’s original** Death Certificate **(if not already provided)** | 🞏 |
| **Child’s original** Long-form Birth Certificate | 🞏 |
| If applicable, confirmation of Legal Guardianship of Child (if applicable) | 🞏 |
| If applicable, letter from educational institution if child between 16 and 22 years’ of age**1** | 🞏 |
| If applicable, medical evidence confirming that child is permanently incapacitated**2** | 🞏 |

**Important Notes**

***1*** *If the Child applicant is aged between 16 and 22 years of age a pension benefit is payable if the child:*

* *is receiving full-time educational or vocational instruction, or*
* *is undergoing full-time instruction or training by any person for any vocation, profession or trade*

*A signed letter from the educational/vocational/training provider must be provided confirming this to be the case and the expected end date for the course/training.*

***2*** *Where a Child applicant is permanently incapacitated by reason of mental or physical infirmity from maintaining himself or herself a signed letter from the child’s doctor/medical practitioner should be provided confirming:*

* *when the incapacity first occurred*
* *the nature of the incapacity*
* *a statement that the incapacity is likely to be permanent in nature*