

months):

## Working Family Allowance Scheme Application Form

1	A 11 (1 3.T
÷	Application No.:
i	(For Official Use Only)
1	· ` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
1	I
1	I
1	ı
1	I
1	I
1	1
	I

☐ Kowloon

☐ Hong Kong Island

Please read carefully the Guidance Notes for Applications under the Working Family Allowance (WFA) Scheme ("WFA Guidance Notes") (WFA100B) before completing this Application Form and provide copies of the required documentary proof in accordance with Section 10 of the WFA Guidance Notes and "Checklist for Submission of Documents for Application" (WFA200B).

 $\square$  Please put a " $\checkmark$ " in the appropriate box(es). If the space in Part 2 to Part 5 of this Application Form is insufficient, please provide relevant information in the Supplementary Sheet to Application Form (WFA002B).

Part 1 Basic Particulars of Household Applying for WFA
Q.1 Claim Period (must be the immediate past six Q.4 Residential Address:

	From/20 to/20			☐ New Term	ritories	
			District			
Q.2	How many member(s) (including Applicant) did the household have in the last month of the Claim Period?		Street			No.
		Est	ate/Village			
	Person(s) [Please provide the personal particulars of all		Building			
	household members Note in Part 2]		zamamig	Block	Floor	Room
Q.3	During the Claim Period, if there was an increase or a decrease in the number of household members (excluding those who were temporarily away for part of the Claim Period), please specify the concerned month(s) and the details:	Q.5	Correspon Residentia		ress (if dif	ferent from
	Claim Month Details					
		Q.6	Contact Te	lephone No.	•	
				(Local Mobile	e Phone)	
			(Acknowledg	ement of applic	cation will be iss	ued by SMS)
	[Please provide the personal particulars of all the above member(s) in Part 2]			(Residential/	Other Household N.	Iember's Telephone)
Note	For the definition of household member(s), please refer to Section	n 3.1 of	the WFA Guid	ance Notes for d	etails.	
Par	t 2 Personal Particulars of Applicant a	nd A	ll Housel	nold Mem	ber(s)	
(I)	Applicant					
Q.1	Name in English:	Q.3	Hong Kon	g Identity Ca	ırd No.:	1
	(Surname) (Name)	Q.4	Month and	Year of Birt	h:	
Q.2	Name in Chinese (Optional):	Q.5	Title: $\square$ M	/ L	(yyyy)	
	(Surname) (Name)		□ M □ M			
	(carrente) (runte)	<u> </u>	u IV	1188		

Others (Please specify:	Q.6	Ethnicity Note: □Chinese □Pakistani □Nepalese	Q.8	Bank Account for receiving WFA
Q.7 Air you applying as a working single parent (a single parent has to live with at least one child aged below 15 during the Claim Period)?   Yes. Please specify the marital status:   New married   Widowed   Divorced   Others:   Separated   Others:   Separated   A single parent may include a guardians     No   Note   The collection of information about the ethnicity is for statistical and research purposes and will not affect the processing or assessment of the WFA application.    (II)   All Household Member(s) (If applicable)     The Household Member(s) (If applicable)     The Household Member   Q.1 Name in English:   Q.1 Name in English:   Q.2 Name in Chinese (Optional):   Q.2 Name in Chinese (Optional):   Q.3 Relationship with the Applicant:   Spouse   Grandparent   Gild   Grandchild   Parent   Others:   Sibling   Q.4 Hong Kong Identity Card No.:   Q.5 Month and Year of Birth:   Gild   Grandchild   Parent   Others:   Sibling   Q.4 Hong Kong Identity Card No.:   Q.5 Month and Year of Birth:   Q.6 Does the member hold a Hong Kong Birth Certificate?   Yes. Please fill in the number:   Yes. Please fill in the		☐Others (Please specify):		(must be an account of the Applicant):
aged below 15 during the Claim Period)?    Yes. Please specify the marital status:   Nover married   Widowed   Divorced   Others:   Separated   A single parent may include a guardian)     No   Note   The collection of information about the ethnicity is for statistical and research purposes and will not affect the processing or assessment of the WiA application.    (II)   All Household Member(s) (If applicable)     1" Household Member(s) (If applicable)     1" Household Member   Q.1 Name in English:   Q.1 Name in English:   Q.1 Name in Chinese (Optional):   Q.2 Name in Chinese (Optional):   Q.3 Relationship with the Applicant:   Spouse   Grandparent   Child   Grandchild   Parent   Others:   Sibling   Q.4 Hong Kong Identity Card No.:   Q.5 Month and Year of Birth:   Q.5 Month and Year of Birth:   Q.6 Does the member hold a Hong Kong Birth Certificate?   Yes. Please fill in the number:   Q.7 Month and Year of Birth:   Q	Q.7	Are you applying as a working single parent (a		Name in English.
Sever married   Widowed   Divorced   Others:   Separated (A single parent may include a guardian)   No		single parent has to live with at least one child		
Never married   Widowed   Divorced   Others:   Separated (A single parent may include a guardian)   No		aged below 15 during the Claim Period)?		Bank Name:
Divorced   Others:   Separated (A single parent may include a guardiam)   No		☐ Yes. Please specify the marital status:		
Separated   (A single parent may include a guardium)   No   Note   The collection of information about the ethnicity is for statistical and research purposes and will not affect the processing or assessment of the WFA application.    (II)   All Household Member     2** Household Member     2** Household Member       2** Household Member		☐ Never married ☐ Widowed		Bank Code Bank Account Number
No   The collection of information about the ethnicity is for statistical and research purposes and will not affect the processing or assessment of the WFA application.    (II)   All Household Member(s) (If applicable)   2nd Household Member   Q.1 Name in English:		☐ Divorced ☐ Others:		_
No   The collection of information about the ethnicity is for statistical and research purposes and will not affect the processing or assessment of the WFA application.    (II)   All Household Member(s) (If applicable)   2nd Household Member   Q.1 Name in English:		☐ Separated (A single parent may include a		
Note   The collection of information about the ethnicity is for statistical and research purposes and will not affect the processing or assessment of the WFA application.    (III)   All Household Member   Q.1   Name in English:   Q.1   Name in English:   Q.2   Name in Chinese (Optional):   Q.2   Name in Chinese (Optional):   Q.3   Relationship with the Applicant:   Spouse   Grandparent   Q.6   Crandparent   Q.7   Worth and Year of Birth:   Q.5   Month and Year of Birth:   Q.5   Month and Year of Birth:   Q.6   Does the member hold a Hong Kong Identity Card No.:   Q.7   Worth   Q.8   Crandparent		*		
Comparison   Com		S		
Comparison   Com	Note	The collection of information about the ethnicity is for stati	stical ar	nd research purposes and will not affect the processing or
1st Household Member   Q.1   Name in English:   Q.1   Name in English:   Q.2   Name in Chinese (Optional):   Q.3   Relationship with the Applicant:   Spouse   Grandparent   Spouse	- 1000	assessment of the WFA application.		
1st Household Member   Q.1   Name in English:   Q.1   Name in English:   Q.2   Name in Chinese (Optional):   Q.3   Relationship with the Applicant:   Spouse   Grandparent   Spouse	/11	) All Household Member(s) (If amilica	hla)	
Q.1 Name in English:    Gurname  (Name) (Name)   Q.2 Name in Chinese (Optional):	1 st	Household Member	<u>7 nd</u>	Household Member
Sumame   (Name)   (Name)   (Sumame)   (Name)   (Name)   (Sumame)   (Name)   (Name)   (Sumame)   (Name)				
Q.2 Name in Chinese (Optional):    Gurmame   (Name)   (Name)	Q.1		Q.1	
Q.2 Name in Chinese (Optional):    Gurmame   (Name)   (Name)				
(Surname) (Name) (Surname) (Name)	0.0		0.0	
Q.3 Relationship with the Applicant:   Spouse   Grandparent     Child   Grandchild     Parent   Others:     Sibling     Q.4 Hong Kong Identity Card No.:   Q.5 Month and Year of Birth:     Sibling     Q.6 Does the member hold a Hong Kong Birth Certificate?     Yes. Please fill in the number:     No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:     Type:	Q.2	Name in Chinese (Optional):	Q.2	Name in Chinese (Optional):
Q.3 Relationship with the Applicant:   Spouse   Grandparent     Child   Grandchild     Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:   Q.5 Month and Year of Birth:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Q.5 Month and Year of Birth:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Q.5 Month and Year of Birth:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Grandchild   Parent   Others:     Sibling   Q.4 Hong Kong Identity Card No.:     Grandchild   Parent   Others:     Grandchild   Parent   Others:     Grandchild   Parent   Others:     Grandchild   Parent   Others:     Grandchild   Grandchild   Parent   Others:     Grandchild   Parent   Others:     Grandchild   Parent   Others:     Grandchild   Grandchild   Parent   Others:     Grandchild   Grandchild   Parent   Others:     Grandc				
Spouse   Grandparent   Child   Grandchild   Parent   Others:   Parent   Others:   Sibling   Parent   Others:   Parent   Others:   Sibling   Parent   Others:   Sibling   Parent   Others:   Parent   Others:   Sibling   Parent   Others:   Sibling   Others:   Parent   Others:   Parent   Others:   Sibling   Others:   Parent   Others:		(Surname) (Name)		
Child   Grandchild   Parent   Others:   Sibling   Q.4 Hong Kong Identity Card No.:   G.5 Month and Year of Birth:   G.5 M	Q.3	1 11	Q.3	
Parent   Others:   Sibling   Sibling   Q.4   Hong Kong Identity Card No.:   Q.5   Month and Year of Birth:   Q.5   Month and Year of Birth:   Q.5   Month and Year of Birth:   Q.6   Does the member hold a Hong Kong Birth Certificate?   Yes. Please fill in the number:   Yes. P				<u> </u>
Sibling   Q.4   Hong Kong Identity Card No.:				!
Q.4 Hong Kong Identity Card No.:  Q.5 Month and Year of Birth:  (mm) (yyyy)    For those applying for the Child Allowance, please complete Q.6 to Q.7 Seed				
Q.5 Month and Year of Birth:    (mm)	0.4		0.4	
Composition	Q.4	Hong Kong Identity Card No.:	Q.4	Hong Kong Identity Card No.:
Composition				
Por those applying for the Child Allowance, please complete Q.6 to Q. 7 No.2   Q.6 Does the member hold a Hong Kong Birth Certificate?   Yes. Please fill in the number:   No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:   Type:	Q.5	Month and Year of Birth:	Q.5	Month and Year of Birth:
Por those applying for the Child Allowance, please complete Q.6 to Q. 7 No.2   Q.6 Does the member hold a Hong Kong Birth Certificate?   Yes. Please fill in the number:   No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:   Type:		(mm) (yyyy)		(mm) (yyyy)
Q.6 Does the member hold a Hong Kong Birth Certificate?  □ Yes. Please fill in the number: □ No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type: No.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)? □ Yes → □ The entire Claim Period □ The following claim month(s):  Q.6 Does the member hold a Hong Kong Birth Certificate? □ Yes. Please fill in the number: □ Yes. Please fill in the number: □ Yes. Please fill in the number: □ No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type: No.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time primary and secondary education or courses below the sub-degree level)? □ Yes → □ The entire Claim Period □ The following claim month(s):				
Certificate?  Yes. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  No.:  Ves. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  Ves. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  Ves. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  No.:  Ves. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  No.:  Ves. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  No.:  Ves. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  Ves. Please fill in the number:  No. If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time primary and secondary education or courses below the sub-degree level)?  Yes → The entire Claim Period  The following claim month(s):	For t	nose applying for the Child Allowance, please complete Q.6 to Q. 7 Note	For the	ose applying for the Child Allowance, please complete Q.6 to Q. 7 Note
Certificate?  Yes. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  No.:  Ves. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  Ves. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  No.:  Ves. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  No.:  No.:  Ves. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  No.:  No.:  Ves. Please fill in the number:  No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  No.	0.6	Does the member hold a Hong Kong Birth	06	Does the member hold a Hong Kong Birth
No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)?  Tyes → □ The entire Claim Period □ The following claim month(s):  No.:  Q.7 If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)? □ Yes → □ The entire Claim Period □ The following claim month(s):	<b>Q.</b> 0		۷.0	
Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  Vo.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)?  Yes → □ The entire Claim Period □ The following claim month(s):  Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)? □ Yes → □ The entire Claim Period □ The following claim month(s): □ No		☐ Yes. Please fill in the number:		☐ Yes. Please fill in the number:
Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  Vo.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)?  Yes → □ The entire Claim Period □ The following claim month(s):  Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)? □ Yes → □ The entire Claim Period □ The following claim month(s): □ No				
Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  Vo.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)?  Yes → □ The entire Claim Period □ The following claim month(s):  Kong Identity Card concurrently, please provide details of another identity document:  Type:  No.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)? □ Yes → □ The entire Claim Period □ The following claim month(s): □ No		□ No. If the member does not hold a Hong		☐ No. If the member does not hold a Hong
document:  Type:  No.:  No.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)?  Yes → □ The entire Claim Period □ The following claim month(s):  document:  Type:  No.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)? □ Yes → □ The entire Claim Period □ The following claim month(s): □ No				
Type:				
No.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)?  □ Yes → □ The entire Claim Period □ The following claim month(s):  No.:  Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)? □ Yes → □ The entire Claim Period □ The following claim month(s): □ No		document:		document:
Q.7 If the member has reached the age of 15 during the Claim Period, did he/she attend any full-time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)?  □ Yes → □ The entire Claim Period □ The following claim month(s): □ No □ No □ No		Type:		Туре:
the Claim Period, did he/she attend any full- time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)?  □ Yes → □ The entire Claim Period □ The following claim month(s): □ No		No.:		No.:
time non-post-secondary programme (e.g. full-time primary and secondary education or courses below the sub-degree level)?  □ Yes → □ The entire Claim Period □ The following claim month(s): □ No □ No □ No □ No □ No □ No	Q.7		Q.7	
full-time primary and secondary education or courses below the sub-degree level)?  □ Yes → □ The entire Claim Period □ The following claim month(s): □ No □ No □ No □ No				
courses below the sub-degree level)?  □ Yes → □ The entire Claim Period □ The following claim month(s): □ No □ No □ No □ No				
<ul> <li>Yes → □ The entire Claim Period</li> <li>□ The following claim month(s):</li> <li>□ No</li> </ul> Yes → □ The entire Claim Period The following claim month(s): □ No				
☐ The following claim month(s): ☐ The following claim month(s): ☐ No ☐ No				
		☐ The following claim month(s):		☐ The following claim month(s):
Note Fligible children must be aged below 15 or aged between 15 and 21 and were receiving full time education (but not post secondary	<b>.</b>			

Note Eligible children must be aged below 15, or aged between 15 and 21 and were receiving full-time education (but not post-secondary education). Please refer to Section 10.4 of the WFA Guidance Notes for details.

3rd H	Household Member	4 <sup>th</sup> ]	Household Member
Q.1	Name in English:	Q.1	Name in English:
$\Omega$	(Surname) (Name)	$\Omega$	(Surname) (Name)
Q.2	Name in Chinese (Optional):	Q.2	Name in Chinese (Optional):
	(Surname) (Name)		(Surname) (Name)
Q.3	Relationship with the Applicant:	Q.3	Relationship with the Applicant:
	☐ Spouse ☐ Grandparent		☐ Spouse ☐ Grandparent
	☐ Child ☐ Grandchild		☐ Child ☐ Grandchild
	☐ Parent ☐ Others:		☐ Parent ☐ Others:
	☐ Sibling		☐ Sibling
Q.4	Hong Kong Identity Card No.:	Q.4	
Q.1		Q.1	
Q.5	Month and Year of Birth:	Q.5	Month and Year of Birth:
	(mm) (yyyy)		(mm) (yyyy)
For tho	se applying for the Child Allowance, please complete Q.6 to Q. 7 Note	For tho	se applying for the Child Allowance, please complete Q.6 to Q. 7 Note
Q.6	Does the member hold a Hong Kong Birth	Q.6	Does the member hold a Hong Kong Birth
	Certificate?		Certificate?
	☐ Yes. Please fill in the number:		☐ Yes. Please fill in the number:
	☐ No. If the member does not hold a Hong		□ No. If the member does not hold a Hong
	Kong Identity Card concurrently, please		Kong Identity Card concurrently, please
	provide details of another identity		provide details of another identity
	document:		document:
	Туре:		Туре:
	No.:		No.:
Q.7	If the member has reached the age of 15 during	0.7	If the member has reached the age of 15 during
~	the Claim Period, did he/she attend any full-	~	the Claim Period, did he/she attend any full-
	time non-post-secondary programme (e.g.		time non-post-secondary programme (e.g. full-
	full-time primary and secondary education or		time primary and secondary education or
	courses below the sub-degree level)?		courses below the sub-degree level)?
	☐ Yes → ☐ The entire Claim Period		
	☐ The following claim month(s):		$\Box$ The following claim month(s):
	□ No		□ No

Note Eligible children must be aged below 15, or aged between 15 and 21 and were receiving full-time education (but not post-secondary education). Please refer to Section 10.4 of the WFA Guidance Notes for details.

# Part 3 Income from Work Note 1 and Paid Working Hours Note 2 of the Applicant/Household member(s) whose paid working hours are aggregated to apply for WFA

Q.1 Please fill in the job details, monthly income from work and monthly paid working hours of the Applicant/household member(s) whose paid working hours are aggregated to apply for WFA:

Name of Household Member(s) reporting paid working hours	Claim Month	/20	/20	/20	/20	/20	/20		
Applicant	Job Details		nt Status: □Employed □Self-employed Note 3						
		Industry: Position:							
	3.5 .1.1	Name of the O	Company/Empl	loyer:		Telephone No.:			
	Monthly Income	\$	\$	\$	\$	\$	\$		
from Work (HK\$)		If the applicant has joined Mandatory Provident Fund (MPF)/provident funds scheme, please confirm that he/she - □has made voluntary contributions, and the above declared income from work has included the relevant voluntary contributions Note 4; or □has not made any voluntary contributions.							
	Monthly Paid Working Hours(1)								
Applicant/	Applicant/ Job Details Employment Status: □Employed □Se		oloyed Self-	Self-employed Note 3					
Other household		Industry:			Position	າ:			
member whose		Name of the O	Company/Empl	loyer:		Telephone No.:	:		
paid working	Monthly	\$	\$	\$	\$	\$	\$		
hours are aggregated to apply for WFA:  Income from Work (HK\$)  If the applicant/other household member has join please confirm that he/she -  Dhas made voluntary contributions, and the abov included the relevant voluntary contributions.		has joined Mi the above declarions Note 4; or	-	unds scheme,					
	Monthly Paid Working Hours(2)								
Total Mo Paid Workir (1)+(2)+Monthly I Hours of othe member(s) wh working hours at to apply for WFA	nthly ag Hours Paid Working r household ose paid re aggregated								

Note 1 Please refer to Section 3.3 of the WFA Guidance Notes for items need to be reported as income from work (including full-time/part-time).

Note 2 Working hours (including full-time/part-time) refer to paid working hours which include hours of paid work, hours derived from paid absence and paid statutory holidays. Please refer to Section 3.2 of the WFA Guidance Notes for the calculation methods.

Note 3 Self-employed persons or casual workers who cannot provide documentary proof for working hours/income can use Forms WFA005B, 006B or 007B to report working hours and income; the relevant forms are printed on blue paper for easy differentiation.

Note 4 Mandatory contributions to MPF/provident funds scheme can be deducted but employees' voluntary contributions are counted as income from work.

## Part 4 Information on Household Income

Q.1 Please provide information on the income of the **Applicant and all household member(s)** in the Claim Period [e.g. **income from full-time/part-time work (including employees' voluntary contributions to MPF/provident funds)** (except those reported in Part 3), **alimony received**, **monthly pension**, **rental income**, **contributions from relatives or friends not residing with the household**, etc.]. Please refer to Section 3.3 of the WFA Guidance Notes for details.

Name of Applicant or	In agent of Ikama	Claim Months and Income Amount (HK\$)					
Household Member(s)	Income Item	/20	/20	/20	/20	/20	/20
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$

## Part 5 Information on Household Assets

Q.1 Please provide information on the value of all the assets, within and outside Hong Kong, of the **Applicant and all household member(s)** as <u>in the last month of the Claim Period</u> [e.g. bank deposits in personal/joint/company accounts, cash savings, cash values of insurance policies (including dividends), stocks, betting account balance, non-self-occupied properties (including those outside Hong Kong), parking spaces, vehicles, business licences of vehicles, accrued benefits that have been withdrawn or can be withdrawn from MPF/provident funds, loans that have not yet been recovered, gold bars, gold coins or other assets]. For details, please refer to Section 3.4 of the WFA Guidance Notes.

Name of Applicant or Household Member(s)	Asset Item	Date of Valuation	Value (HK\$) (If not in HKD, please specify currency)	Percentage of Share (if jointly-owned)
		/20		%
		//20		%
		//20		%
		//20		%

## Part 6 Declaration on Income and Asset

1 KIV O D COMPANION ON MICHAEL 1880	
Q.1 Have Applicant and all household member(s) reported all earnings from employment, other income and	
assets?	
□ Yes	
□ No (Applicant should provide the relevant information to the WFAO as soon as possible, otherwise the WFAO would be	
unable to process the application)	
Q.2 Did the total value of your household assets exceed the asset limit of this Scheme during the entire Claim	
Period?	
☐ Yes, month(s) exceeding the asset limit:	
(The household is not eligible for WFA in the month(s) in which the asset limit was exceeded)	
□ No	

## Part 7 Declaration by Applicant

The Applicant must read and sign on this part to declare the following –

- (1) I and my household member(s) (if any) as reported in this Application Form (WFA001B) and Supplementary Sheet to this Application Form (WFA002B) have read the Guidance Notes for Applications under the Working Family Allowance ("WFA") Scheme ("WFA Guidance Notes"), including the Additional Information for WFA Guidance Notes which sets out the information on the monthly household income and asset limits. I and my household member(s) (if any) understand and agree to the arrangements in relation to applications for WFA and agree to comply with all the requirements set out in the said document(s).
- (2) Since an application for Working Family Allowance ("WFA") is made on a household basis, my household member(s) (if any) has/have agreed that
  - (i) I shall submit the application on behalf of my household; and
  - (ii) the Working Family Allowance Office ("WFAO") of the Working Family and Student Financial Assistance Agency disburses the full WFA payment approved under this application direct to the bank account held by me.
- (3) The information provided in the Application Form, Supplementary Sheet(s) and/or Supplementary Form(s) (if applicable), any representations made in relation to this application, and the documentary proof submitted are true, complete and accurate. I undertake to report any correction of the information in the relevant forms and provide the relevant information to the WFAO as soon as possible to facilitate the WFAO's consideration of my household's eligibility for WFA.
- (4) I and my household member(s) (if any) -
  - (i) have read the Personal Information Collection Statement ("PICS") and understand its content, and agree that the WFAO and its

- agents can handle and use the personal data provided in this application in accordance with the PICS and the WFA Guidance Notes; and disclose to and verify with the relevant Government bureaux/departments, concerned parties, companies or organisations the personal data of myself and my household member(s) and the information on companies under any name(s) of myself and/or my household member(s);
- (ii) agree that where necessary, the WFAO may contact me or any of my household member(s) to vet or clarify any information in this application;
- (iii) agree that relevant Government bureaux/departments/companies/organisations (including but not limited to the Social Welfare Department, the Labour Department, the Immigration Department, the Census and Statistics Department, the Housing Department, the Hong Kong Housing Society, the Land Registry, banks, employers, schools/educational institutions, insurance companies, the Hong Kong Mortgage Corporation Limited, the Mandatory Provident Fund Schemes Authority and the approved trustees of Mandatory Provident Fund Schemes) to release our respective personal data and the information on companies under any name(s) of myself and/or my household member(s) to the WFAO for the purpose of processing and vetting any information in this application;
- (iv) understand that the WFAO will select some applications for special investigation, and agree to co-operate with the investigators of WFAO, provide the original supporting documents and other required information for verification if necessary. Households which intentionally obstruct the WFAO staff during investigation, conceal information or fail to provide the necessary information may be required to refund in full the paid allowance and may be liable to prosecution;
- (v) understand that the WFAO reserves the right to review this application and may, as and when necessary, adjust the amount of allowance that may be disbursed to my household;
- (vi) agree to refund in full the Government of the Hong Kong Special Administrative Region any overpaid allowance received by my household, or agree that the concerned overpaid amount be offset by the WFAO against the subsidy/allowance(s) approved in my and/or my household members' (regardless of changes in household members) future applications under any schemes administered by the WFAO upon the request of the WFAO; and
- (vii) understand that wilfully making a false statement, misrepresentation or concealment of any information in order to obtain WFA by deception is a criminal offence, the commission of which, in addition to being disqualified for WFA, can lead to imprisonment for a maximum of 14 years under the Theft Ordinance (Cap. 210).

Name of Applicant	Signature	Date

## Personal Information Collection Statement

### Purpose of collection

- 1. The Working Family Allowance Office ("WFAO") of the Working Family and Student Financial Assistance Agency and any agencies/organisations authorised by the WFAO will use the personal data provided by you and your household members for the following purposes -
- (a) processing the application of Working Family Allowance (WFA), verifying the relevant information to prevent double benefits and detect fraud, and dealing with and recovering overpaid WFA and the Individual-based Work Incentive Transport Subsidy (I-WITS) Note (if any);
- (b) matching you and your household members' personal data with the database of relevant Government bureaux/departments/organisations (including but not limited to the Social Welfare Department) for the processing of the application and prevention of double benefits; and
- (c) statistical, analytical, and research purposes, and the statistics or research results obtained will not be released or made available to a third party in a form that identifies the data subjects or any of them.
- 2. The WFAO may engage a relevant organisation/company to assist in conducting research, survey or review on the WFA Scheme when necessary. The WFAO may transfer the relevant contact details of those applying households (including the applicant's name, correspondence address and contact telephone number) which are selected randomly to the organisation/company for the purpose of inviting the households to attend interviews and/or participate in the survey. Whether or not the households accept the interviews and/or participate in the survey is purely voluntary. This will not affect your applications. The WFAO will request the organisation/company to delete all the personal data collected in relation to the WFA Scheme upon completion of the research work.
- 3. Random checks on some applications in relation to the scheme will be carried out by the WFAO through home visits or other means to verify the completeness and truthfulness of the information provided. During the home visits or verification, the WFAO staff may require you and your household members to clarify the information in the application or provide further information. The originals of the relevant information will be examined. It is your responsibility to keep all the documentary proof of the information in your application for at least two years and co-operate with the WFAO staff.
- 4. The provision of personal data to the WFAO by you and your household members is voluntary, but if you fail to provide the personal data required, the WFAO may not be able to process your application.

## Classes of transferees

5. For the purposes stated in paragraphs 1 and 2 above, or with the consent of you and your household members, or where disclosure is authorised or required by the law, the personal data of you and your household members may be disclosed by the WFAO to the relevant Government bureaux/departments/organisations/companies. The WFAO may contact the relevant Government bureaux/departments/organisations/companies to obtain and verify information for the purposes stated in paragraphs 1 and 2 above. The relevant Government bureaux/departments/organisations/companies include but are not limited to the Social Welfare Department, the Labour Department, the Immigration Department, the Census and Statistics Department, the Housing Department, Hong Kong Housing Society, the Land Registry, banks, schools/educational institutions, insurance companies, the Hong Kong Mortgage Corporation Limited, the Mandatory Provident Fund Schemes Authority, approved trustees of the Mandatory Provident Fund Schemes, you and your household members' employers, and the service providers employed by the WFAO to assist in processing the applications.

### Access to personal data and enquiries

6. Information and documents submitted in relation to this application will not be returned. In accordance with the Personal Data (Privacy) Ordinance (Cap. 486), you and your household members have the right to access and make corrections to the personal data provided in the application form and other application documents. You and your household members may also request a copy of the relevant personal data by paying an administration fee. Requests for access to and/or corrections of personal data should be made in writing to Deputy Departmental Secretary (General) by post to the WFAO at 19/F, 181 Hoi Bun Road, Kwun Tong, Kowloon.

Note I-WITS was abolished in June 2021 with the last claim month in May 2021.