



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

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___
	Job Details	Employment Status: <input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <sup>Note 3</sup> Industry: _____ Position: _____ Name of the Company/Employer: _____ Telephone No. of the Company/Employer: _____					
	Monthly Income from Work (HK \$)	\$	\$	\$	\$	\$	\$
	If the applicant/other household member has joined Mandatory Provident Fund (MPF)/provident funds scheme, please confirm that he/she - <input type="checkbox"/> has made voluntary contributions, and the above declared income from work has included the relevant voluntary contributions <sup>Note 4</sup> ; or <input type="checkbox"/> has not made any voluntary contributions.						
	Monthly Paid Working Hours						
	Job Details	Employment Status: <input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <sup>Note 3</sup> Industry: _____ Position: _____ Name of the Company/Employer: _____ Telephone No. of the Company/Employer: _____					
	Monthly Income from Work (HK \$)	\$	\$	\$	\$	\$	\$
	If the applicant/other household member has joined MPF/provident funds scheme, please confirm that he/she - <input type="checkbox"/> has made voluntary contributions, and the above declared income from work has included the relevant voluntary contributions <sup>Note 4</sup> ; or <input type="checkbox"/> has not made any voluntary contributions.						
	Monthly Paid Working Hours						
	Job Details	Employment Status: <input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <sup>Note 3</sup> Industry: _____ Position: _____ Name of the Company/Employer: _____ Telephone No. of the Company/Employer: _____					
	Monthly Income from Work (HK \$)	\$	\$	\$	\$	\$	\$
	If the applicant/other household member has joined MPF/provident funds scheme, please confirm that he/she - <input type="checkbox"/> has made voluntary contributions, and the above declared income from work has included the relevant voluntary contributions <sup>Note 4</sup> ; or <input type="checkbox"/> has not made any voluntary contributions.						
	Monthly Paid Working Hours						
	Job Details	Employment Status: <input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <sup>Note 3</sup> Industry: _____ Position: _____ Name of the Company/Employer: _____ Telephone No. of the Company/Employer: _____					
	Monthly Income from Work (HK \$)	\$	\$	\$	\$	\$	\$
	If the applicant/other household member has joined MPF/provident funds scheme, please confirm that he/she - <input type="checkbox"/> has made voluntary contributions, and the above declared income from work has included the relevant voluntary contributions <sup>Note 4</sup> ; or <input type="checkbox"/> has not made any voluntary contributions.						
	Monthly Paid Working Hours						

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 (continued)**

- 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 Household Member(s)	Income Item	Claim Months and Income Amount (HK\$)					
		___/20__	___/20__	___/20__	___/20__	___/20__	___/20__
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$

**Part 5 Information on Household Assets (continued)**

- 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 in the last month of the Claim Period [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__		%
		___/___/20__		%
		___/___/20__		%

## Part 6 Declaration by Applicant (continued from Part 7 of Working Family Allowance Scheme Application Form(WFA001B))

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 Supplementary Sheet to the Application Form (WFA002B) and the Application Form (WFA001B) 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