



Working Family Allowance Scheme Sample for Completing Application Form

The Application Form is available in English and Chinese. If the applicant submits an English Application Form, the notifications and other correspondence from the Working Family Allowance Office ("WFAO") will be issued in English. If a Chinese Application Form is submitted, the notifications and other correspondence from the WFAO will be issued in Chinese.

Part 1 Basic Particulars of Household Applying for WFA

Q.1 Claim Period (must be the immediate past six months):

From 5 /20 24 to 10 /20 24

Q.2 How many member(s) (including Applicant) did the household have in the last month of the Claim Period?

5 Person(s)

[Please provide the personal particulars of all household members ^{Note} in Part 2]

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:

Claim Month	Details
9/2024	SHEUNG HOI SUM was born

[Please provide the personal particulars of all the above member(s) in Part 2]

Q.4 Residential Address:

☐ Hong Kong Island ☐ Kowloon
☒ New Territories

District **Tai Po**

Street **Fu Fu Street** No. **1**

Estate/Village **On On Estate**

Building **Yan Yan House**

Block - Floor **28** Room **18**

Q.5 Correspondence Address (if different from Residential Address):

**Room B, 18/F, Block 4, Mei Ho Court,
10 Mei Ho Street, Kwun Tong, Kowloon**

Q.6 Contact Telephone No.:

XXXX XXXX (Local Mobile Phone)

(Acknowledgement of application will be issued by SMS)

XXXX XXXX (Residential / Other Household Member's Telephone)

Note For the definition of household member(s), please refer to Section 3.1 of the WFA Guidance Notes for details.

Please set out the name(s) of relevant household member(s) and the changes. If there was an increase or a decrease in the number of household member(s), the personal particulars of the relevant household member(s) also need to be provided in Part 2 (for the definition of household member(s), please refer to Section 3.1 of the WFA Guidance Notes for details).

Part 2 Personal Particulars of Applicant and All Household Member(s)

(I) Applicant

Q.1 Name in English:

SHEUNG **KAN FAN**

(Surname) (Name)

Q.2 Name in Chinese (Optional):

常 **勤奮**

(Surname) (Name)

Q.6 Ethnicity Note: ☒ Chinese ☐ Pakistani ☐ Nepalese
☐ Others (Please specify): _____

Q.7 Are 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:

☐ Never married ☐ Widowed

☐ Divorced

☐ Separated

☐ Others : _____

(A single parent may include a guardian)

☒ No

Q.3 Hong Kong Identity Card No.:

K **1** **2** **3** **4** **5** **6** **(7)**

Q.4 Month and Year of Birth:

1 **0** (mm) **1** **9** **7** **9** (yyyy)

Q.5 Title: ☒ Mr

☐ Ms

☐ Miss

Q.8 Bank Account for receiving WFA
 (must be an account of the Applicant):

Name in English:

SHEUNG KAN FAN

Bank Name:

Hang Fuk Bank

Bank Code - Bank Account Number

0 8 8 - **8 8 8 1 2 3 4 5 6 7 8 9**

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.

Applicant must be the account holder. A time deposit account, credit account or foreign currency account is not accepted.

Please refer to the monthly bank statement/passbook for the bank code and account number. In case of doubt about the bank code (e.g. 003 for Standard Chartered Bank, 004 for HSBC, 024 for Hang Seng Bank), please check with the concerned bank.

(II) All Household Member(s) (If applicable)

1st Household Member

Q.1 Name in English:

ON

SUM LOK

(Surname) (Name)

Q.2 Name in Chinese (Optional):

安

心樂

(Surname) (Name)

Q.3 Relationship with the Applicant:

☒ Spouse

☐ Grandparent

☐ Child

☐ Grandchild

☐ Parent

☐ Others: _____

☐ Sibling

Q.4 Hong Kong Identity Card No.:

Z

7

6

5

4

3

2

(1)

Q.5 Month and Year of Birth:

3

(mm)

1

9

8

4

(yyyy)

For those applying for the Child Allowance, please complete Q.6 to Q.7 ^{Note}

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): _____

☐ 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.

If "Others" is selected, please specify the relationship of the household member with the applicant.

If the relationship of the child/young member (a household member aged below 15 or between 15 and 21 receiving full-time education (but not post-secondary education)) with the applicant is "Others", please specify their relationship and explain here or in writing why the child/young member concerned was not living with his/her parent(s).

2nd Household Member

Q.1 Name in English:

SHEUNG

FUN LOK

(Surname) (Name)

Q.2 Name in Chinese (Optional):

常

歡樂

(Surname) (Name)

Q.3 Relationship with the Applicant:

☐ Spouse

☐ Grandparent

☒ Child

☐ Grandchild

☐ Parent

☐ Others: _____

☐ Sibling

Q.4 Hong Kong Identity Card No.:

Y

9

8

7

6

5

4

(3)

Q.5 Month and Year of Birth:

1

1

(mm)

2

0

0

6

(yyyy)

For those applying for the Child Allowance, please complete Q.6 to Q.7 ^{Note}

Q.6 Does the member hold a Hong Kong Birth Certificate?

☒ Yes. Please fill in the number:

Y 9 8 7 6 5 4 (3)

☐ 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): _____

☐ No

Full-time non-post-secondary programmes refer to full-time courses below the sub-degree level, for example:

- (a) Full-time primary and secondary education (excluding evening school courses);
- (b) Diploma of Applied Education Programme;
- (c) Foundation Diploma programmes; and
- (d) Diploma of Vocational Education Programmes of the Vocational Training Council, etc.

3 rd Household Member					4 th Household Member				
Q.1	Name in English:				Q.1	Name in English:			
	SHEUNG	HOI SUM				SHEUNG	KEI TAI		
	(Surname) (Name)					(Surname) (Name)			
Q.2	Name in Chinese (Optional):				Q.2	Name in Chinese (Optional):			
	常	開心				常	書泰		
	(Surname) (Name)					(Surname) (Name)			
Q.3	Relationship with the Applicant:				Q.3	Relationship with the Applicant:			
	<input type="checkbox"/> Spouse <input type="checkbox"/> Grandparent <input checked="" type="checkbox"/> Child <input type="checkbox"/> Grandchild <input type="checkbox"/> Parent <input type="checkbox"/> Others: _____ <input type="checkbox"/> Sibling					<input type="checkbox"/> Spouse <input type="checkbox"/> Grandparent <input type="checkbox"/> Child <input type="checkbox"/> Grandchild <input checked="" type="checkbox"/> Parent <input type="checkbox"/> Others: _____ <input type="checkbox"/> Sibling			
Q.4	Hong Kong Identity Card No.:				Q.4	Hong Kong Identity Card No.:			
	S	8	7	6	5	4	3	(2)	
Q.5	Month and Year of Birth:				Q.5	Month and Year of Birth:			
	9	(mm)			2	0	2	4	(yyyy)
For those applying for the Child Allowance, please complete Q.6 to Q. 7 ^{Note}					For those applying for the Child Allowance, please complete Q.6 to Q. 7 ^{Note}				
Q.6	Does the member hold a Hong Kong Birth Certificate?				Q.6	Does the member hold a Hong Kong Birth Certificate?			
	<input checked="" type="checkbox"/> Yes. Please fill in the number: <div style="display: flex; justify-content: space-between; width: 100%;"> S 8 7 6 5 4 3 (2) </div>					<input type="checkbox"/> Yes. Please fill in the number: <div style="display: flex; justify-content: space-between; width: 100%;"> () </div>			
	<input type="checkbox"/> No. If the member does not hold a Hong Kong Identity Card concurrently, please provide details of another identity document: Type: _____ No.: _____					<input type="checkbox"/> 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)?				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)?			
	<input type="checkbox"/> Yes → <input type="checkbox"/> The entire Claim Period <input type="checkbox"/> The following claim month(s): _____					<input type="checkbox"/> Yes → <input type="checkbox"/> The entire Claim Period <input type="checkbox"/> The following claim month(s): _____			
	<input type="checkbox"/> No _____					<input type="checkbox"/> 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.

The applicant/household member(s) whose working hours are aggregated to apply for WFA are only required to report income after deducting the employee's mandatory contribution of Mandatory Provident Fund (MPF)/provident funds. (Please pay attention that mandatory contributions to MPF/provident funds can be deducted but voluntary contributions are required to be counted as income from work.)

For example, the applicant's salary before MPF contribution was \$10,000. The salary after 5% (\$500) mandatory MPF contribution was \$9,500. Therefore, the applicant should fill in \$9,500 as the monthly income of this job.

For the methods of calculating the working hours, please read Section 3.2 of the WFA Guidance Notes.

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	5 /20 24	6 /20 24	7 /20 24	8 /20 24	9 /20 24	10 /20 24
Applicant SHEUNG KAN FAN	Job Details	Employment Status: <input checked="" type="checkbox"/> Employed <input type="checkbox"/> Self-employed ^{Note 3} Industry: <u>Transportation</u> Position: <u>Lorry Driver</u> Name of the Company/Employer: <u>XX Transportation Company</u> Telephone No.: <u>XXXX XXXX</u>					
	Monthly Income from Work (HK\$)	\$9,500	\$9,500	\$9,500	\$9,500	\$9,500	\$8,000
	If the applicant 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 ^{Note 4} ; or <input checked="" type="checkbox"/> has not made any voluntary contributions.						
	Monthly Paid Working Hours(1)	144	144	144	144	144	120
Applicant/ Other household member whose paid working hours are aggregated to apply for WFA: ON SUM LOK	Job Details	Employment Status: <input checked="" type="checkbox"/> Employed <input type="checkbox"/> Self-employed ^{Note 3} Industry: <u>Catering</u> Position: <u>Part-time Cashier</u> Name of the Company/Employer: <u>YY Restaurant</u> Telephone No.: <u>XXXX XXXX</u>					
	Monthly Income from Work (HK\$)	\$3,000	\$3,000	\$3,000	\$3,000	\$0	\$0
	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 ^{Note 4} ; or <input checked="" type="checkbox"/> has not made any voluntary contributions.						
	Monthly Paid Working Hours(2)	50	50	50	50	0	0
Total Monthly Paid Working Hours (1)+(2)+Monthly Paid Working Hours of other household member(s) whose paid working hours are aggregated to apply for WFA		194	194	194	194	144	120

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).

The working hours of all household members are aggregated under the WFA Scheme. Please provide the name and the monthly working hours of the household member(s) whose paid working hours are aggregated to apply for WFA.

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

Total Monthly Working Hours are the sum total of all the paid working hours of all household member(s) (including Applicant) who reported paid working hours. For the above-mentioned example, the Total Monthly Working Hours should be the sum of the monthly working hours of 144 by Applicant and the monthly working hours of 50 by another household member ON SUM LOK. The Total Monthly Working Hours should be 194 working hours.

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 Household Member(s)	Income Item	Claim Months and Income Amount (HK\$)					
		<u>5/20 24</u>	<u>6/20 24</u>	<u>7/20 24</u>	<u>8/20 24</u>	<u>9/20 24</u>	<u>10/20 24</u>
SHEUNG KEI TAI	Contribution from relatives not residing with the household	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$

The applicant only needs to fill in the cash values and dividends of insurance policies.

If the assets are not enumerated in Hong Kong dollars, please specify the currency.

As a general rule, the date of valuation of assets should be in the last month of Claim Period. If the information on the value of individual assets item(s) in the last month is not available, please fill in the latest available value of the assets item(s).

If the total monthly assets of the household applying for WFA exceeded the asset limit in the last month of the Claim Period, the asset value of the previous month has to be reported, so on and so forth.

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 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)
SHEUNG KAN FAN	Saving Insurance (AA Insurance)	30 / 9 / 20 24	10,000 (US\$)	- %
SHEUNG KAN FAN	HK Jockey Club Account Balance	31 / 10 / 20 24	1,000	- %
SHEUNG KAN FAN	XX Company Stocks (400 shares)	31 / 10 / 20 24	20,000	- %
SHEUNG KAN FAN	Deposit (CC Bank)	31 / 10 / 20 24	40,000	50 %
ON SUM LOK	Deposit (CC Bank)	31 / 10 / 20 24	40,000	50 %
SHEUNG KEI TAI	Deposit (CC Bank)	31 / 10 / 20 24	20,000	- %
		___ / ___ / 20 ___		%

If SHEUNG KAN FAN and ON SUM LOK held a joint deposit account with a balance of \$40,000 with each holding \$20,000, (i.e. 50%), under such circumstances, when reporting the item, the value for that joint account to be reported should be \$40,000 and the percentage of share should be 50% for both SHEUNG KAN FAN and ON SUM LOK.

Part 6 Declaration on Income and Asset

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...



- ...
(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
SHEUNG KAN FAN		20/11/2024