

## Part 1 About you and your partner - continued

27. Please tick if you or your partner are:

	You	Your partner
• an apprentice	<input type="checkbox"/>	<input type="checkbox"/>
• on youth training	<input type="checkbox"/>	<input type="checkbox"/>
• in legal custody	<input type="checkbox"/>	<input type="checkbox"/>
• severely mentally impaired	<input type="checkbox"/>	<input type="checkbox"/>
• registered blind	<input type="checkbox"/>	<input type="checkbox"/>
• long-term sick or disabled	<input checked="" type="checkbox"/>	<input type="checkbox"/>

We will contact you if we need any more information.

## Part 2 About children

You may be able to get more benefit if there are children in your household and they are:

- under 16;
- aged 16 or 17 and registered for work or youth training; or
- aged 16, 17 or 18 and in education doing a course not higher than GCE A-level, SCE Higher level or GNVQ (advanced).

28. Are there any children in your household?

No  Go to Part 3.

Yes  Give details below

If you have more than three children please use the space provided on the next two pages

	First child	Second child	Third child
29. Last name (family name)			
30. Other names			
31. Date of birth	//	//	//
32. What is the child's sex?			
33. The child's relationship to you			
34. The child's relationship to your partner			
35. Usual address if different from yours			
36. Child Benefit number			
37. Who gets the Child Benefit for them?			

We need to see proof of this.

38. Does the child have any savings?

No <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>
Yes <input type="checkbox"/> How much are their savings?	Yes <input type="checkbox"/> How much are their savings?	Yes <input type="checkbox"/> How much are their savings?
£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
We need to see proof of this.	We need to see proof of this.	We need to see proof of this.