Social Welfare Services **COVID-UP**

Data Classification R



Application form for **COVID Pandemic Unemployment Payment**

This is an emergency payment

Please make a full jobseekers application form (UP1) within the next six weeks, form are available on www.gov.ie/deasp. This Payment will only last for a maximu of SIX weeks.

First Name
PPS No
County
E-mail address:
Date of Birth
Employer name, address and phone no
Last day worked/paid to: / / / / 2020 Why did this job finish?
Are you still working casually, part-time etc.? Yes 🔲 No 🔲 🔄
Are you in receipt of another weekly Social Welfare payment ? Yes 🔲 No 🔲
Bank Account Details
Bank Name
Account Name
Please keep checking your Bank Account as payment may issue in advance of notification.
 DECLARATION BY CLAIMANT I declare that I am not being paid by my employer at the moment. I state that I will inform the Department if there are any changes in my circumstances which may affect my entitlement to payment. I know that it is an offence to provide false information or to withhold information to qualify for this payment.
Signed: Date: / /2020
Claimant's Signature
Post this form back to PO Box 12896, Dublin 1 or drop into your local Intreo Centre/Social Welfare Branch Office
Data Protection Statement
The Department of Employment Affairs and Social Protection administers Ireland's social protection system. Customers are required to provide personal data to determine eligibility for relevant payments/benefits. Personal data may be exchanged with other Government Departments/Agencies where provided for by law. Our data protection policy is available at <u>www.gov.ie/privacystatement</u> or in hard copy
For Official Use Only
I award a payment to this customer - Signature of DP/DO: Date://2020

Name of DP/DO: