

Certificate of Benefits Received Form UHIFEC1

This form should be completed if an application for self-supporting status is to include periods when you were in receipt of Department of Work and Pensions (DWP) benefit(s) or to verify Benefit(s) income for your Parent/Guardian/Spouse/Partner during the last tax year.

Student Name	Date of Birth	D	D	M	M	M	VI
Parent/guardian/spouse or partner Name (if not the Student)							
National Insurance Number							
Address							

The remainder of this form must be completed by DWP as confirmation of Benefit(s) received.

Please enter the type of benefit currently received (if any)	
Date of current claim paid FROM	
If the claimant became unemployed after 05 April 2012, enter gross pay per P45	£
Current Weekly rate of Taxable Benefit	£
Current Weekly rate of Non-Taxable Benefit	£
Is the claimant claiming as a lone parent? (please \checkmark)	Yes No

Please enter details of all other claims if the claimant was in receipt of benefit(s) during the tax year. If the claimant is the student and under 25 years please give details for the past three tax years.

Type of Benefit	From	То	Amount Paid	Total Value
			£	£
			£	£
			£	£
Signature of DWP Staff				
Name			ob itle	
Email				
Telephone Number		D	ate	
Contact Address			Official Star	np