**Child Dependant with No Income or Benefits:**

**Statutory Declaration of Eligibility**

**Counter-signatories of this form, as well as Employees, MUST read and understand the Guidance Notes overleaf and online at** [**www.raildeliverygroup.com/rst**](http://www.raildeliverygroup.comg/rst) **before completing and signing this form.**

**If it is completed incorrectly, then it will be rejected and you may have to pay for another declaration.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Employee details** | | | | | | | |
| Title | Choose an item. | | First Name: | Enter your First Name | | Last Name: | Enter your Last Name |
| Address: | | Enter the 1st line of your address | | | |  | |
| Enter the 2nd line of your address | | | | Home Phone: | Enter your Home Phone |
| Enter your TOWN | | | | Mobile No: | Enter your Mobile No |
| Enter your County | | | | Email: | Enter your Email |
| Postcode: | | Enter your POSTCODE | | | |  | |
| **Dependant Child details** | | | | | | | |
| Title | Choose an item. | | First Name: | Child’s First Name | | Last Name: | Child’s Last Name |
|  | | | | | | Date of Birth: | Child’s DoB |
| **Details of the child dependant’s circumstances (see guidance notes)** | | | | | | | |
| Your Dependant’s circumstances | | | | | | | |
| Documents shown to the counter-signatory | | | | | | | |
| Your Dependant’s documentary evidence | | | | | | | |
| **Statutory declaration by the Employee** | | | | | | | |
| I declare that my dependant child, named above, resides fully and only with me and that I am solely and fully responsible for their upkeep. I further declare that they have no income from employment or any other source (except income directly from myself) and no state benefits whatsoever.  I make this Declaration conscientiously believing the same to be true by virtue of the Statutory Declarations Act 1835.  Further,   * I confirm that all details provided are correct. * I understand that I am responsible for the correct use of their rail staff travel facilities and understand that such use is subject to the Conditions of Issue and Use which can be found at [www.raildeliverygroup.com/rst/conditions-of-issue-and-use](http://www.raildeliverygroup.com/rst/conditions-of-issue-and-use) * I understand that Rail Staff Travel’s privacy information is available online at [www.raildeliverygroup.com/rst/rst-privacy](http://www.raildeliverygroup.com/rst/rst-privacy) and that I have read it and have made my dependant aware of it * If I am in any doubt about eligibility, I understand that I MUST check and that any attempt to obtain or use rail staff travel facilities fraudulently may result in disciplinary action and/or legal proceedings and/or permanent withdrawal of all rail staff travel facilities for myself and all of my dependants. | | | | | | | |
| Date | | | | Enter date you Signed | | | |
| Employee’s Signature: | | | | Insert Signature Here | | | |
| **Declaration by the Solicitor, Notary Public, Magistrate or Commissioner for Oaths** | | | | | | | |
| I confirm that the above-named has made this Declaration before me and has shown me the evidence listed above, in accordance with the guidelines published online. I therefore believe this Declaration to be true. | | | | | | | |
| Signatory | | Insert Signatory Here | | | Date of Admission | | Date of Admission |
| Firm Name | | Insert Firm’s Name | | | Firm’s Stamp  (if not available, attach a letterhead) | |  |
| Firm’s Address: | | Insert Firm’s Address | | |
| Signature of counter-signatory: | | | | Insert Counter Signature Here | | | |

**Guidance on completing form xx13 – Child Dependant with No Income or Benefits**

The Counter-signatory of this form MUST be a Solicitor, a Notary Public, a Magistrate or a Commissioner of Oaths.

The counter-signatory should not witness or counter-sign this form unless, in their opinion, the description of circumstances and any documentary proof supporting this provide sufficient evidence that the child dependant named has no income. Any alterations to the form must also be counter-signed.

The counter-signatory and the employee must read and abide by these Guidance Notes before completing and signing this form.

You **DO** need to complete this form in respect of every child where they have no income from employment or any other source (except income directly from the Employee) and no state benefits whatsoever.

We understand that it's difficult to prove the absence of something, hence this form.

Note that support from the “Bank of Mum and Dad” is allowed and does not count as income for the purposes of this declaration (although it should be declared within the circumstances overleaf).

Documents that **must** be shown to the counter-signatory must be at least one of:

* **HMRC Statement** - the statement or letter must:
  + be dated within the last 3 months,
  + be on HMRC letter-headed paper,
  + confirm that they have no earned income for the last fiscal year or for any fiscal year where you have not previously provided proof of unemployment   
    You will also be required to prove that they are currently unemployed.
* **DWP Statement** - the statement or letter must:
  + be dated within the last 3 months,
  + be on DWP (or similar) letter-headed paper,
  + confirm that they are currently unemployed,
  + confirm that they have been continuously unemployed for the last 12 months (or since the date of your last declaration, whichever is the earlier).   
    You will also be required to prove their unemployment for any period where you have not previously provided proof.
* **For P60U Document** - the document must:
  + be dated for the last fiscal year,
  + be the official P60U issued to them.   
    You will also be required to prove that they are currently unemployed.

In addition, documents such as bank/building society current or deposit account statements may be used as supporting evidence of no income to be provided to the counter-signatory but are not acceptable as proof on their own.

**SWEARING THE OATH: *Who can witness this form?***

This form must be witnessed by, declared in front of and counter-signed by one of the following:

* A solicitor authorised to act as a Commissioner for Oaths and regulated by the Law Society
* A Notary Public (listed by the Notaries Society)
* A Magistrate
* A Commissioner for Oaths

Any fees incurred in the creation of this Declaration must be borne by the Employee. This may include translation fees to satisfy the counter-signatory.