Income Details, Benefits (Part C)

Enter your details below if you received social security benefits between 6 April 2022 and 5 April 2023 (tax year 2022-23). If this applies to more than one person, use both sides of this form. When you have completed your details, give it to the Student Support officer at your institution

RSS student details				
Surname / Family Name:				
First Name(s):				
Date of Birth:	2 Y Y			
Adult 1 should enter their details below. If Adult 2 received benefits, complete Adult 2 overleaf. If the student also received benefits, please ask for another form and complete all 3 sections				
Surname:	National Insurance number:			
First Name:	Relationship to Student:			
Address:				
I authorise the Department for Work and Pensions to disclomy benefits and allowances for the purposes of assessing a Residential Support Scheme.		Sign here		
Far DWD office was asked as at write helm, this line				
For DWP office use only - do not write below this line.				
C1 - Adult 1 named above was in receipt of Income Support, Income-based Jobseeker's Allowance, Income-related Employment and Support Allowance, Universal Credit or Pension Credit during the tax year 2022-23				
	and to complete any firstbar a	vestions Cians and date t	ha daalayatian ayarlaaf	
Yes, for the whole year You do not not	eed to complete any further q	uestions. Sign and date ti	ne declaration overleat.	
Yes, for the whole year You do not not not not not not not not not no	From (date) D D M M Y Y	To (date)	Complete question	
Yes, for part of the year – fill in the start and end dates in the boxes provided	From (date) D D M M Y Y	To (date)	Complete question C2 if applicable and sign and date the declaration overleaf.	
Yes, for part of the year – fill in the start and end dates in the	From (date) D D M M Y Y D D M M Y Y other benefits durin	To (date) D D M M Y Y D D M M Y Y g the tax year 202	Complete question C2 if applicable and sign and date the declaration overleaf.	
Yes, for part of the year – fill in the start and end dates in the boxes provided	From (date) D D M M Y Y	To (date)	Complete question C2 if applicable and sign and date the declaration overleaf.	
Yes, for part of the year – fill in the start and end dates in the boxes provided C2 - Adult 1 named above was in receipt of	From (date) D D M M Y Y Other benefits durin From (date) D M M Y Y	To (date) D D M M Y Y D D M M Y Y g the tax year 202	Complete question C2 if applicable and sign and date the declaration overleaf.	
Yes, for part of the year – fill in the start and end dates in the boxes provided C2 - Adult 1 named above was in receipt of Carer's Allowance (including any CDI elements)	From (date) D D M M Y Y Other benefits durin From (date) D M M Y Y	To (date) D D M M Y Y D D M M Y Y g the tax year 202	Complete question C2 if applicable and sign and date the declaration overleaf.	
Yes, for part of the year – fill in the start and end dates in the boxes provided C2 - Adult 1 named above was in receipt of Carer's Allowance (including any CDI elements) Contribution-based Employment and Support Allowance Contribution-based Jobseeker's Allowance	From (date) D D M M Y Y Other benefits durin From (date) D M M Y Y	To (date) D D M M Y Y D D M M Y Y g the tax year 202	Complete question C2 if applicable and sign and date the declaration overleaf.	
Yes, for part of the year – fill in the start and end dates in the boxes provided C2 - Adult 1 named above was in receipt of Carer's Allowance (including any CDI elements) Contribution-based Employment and Support Allowar Contribution-based Jobseeker's Allowance (excluding any amounts of JSA[IB]) Incapacity benefit – short term higher rate (gross amounts including any CDI elements). Exclude Incapacity Benefit claimed before 1995 Incapacity benefit – long term higher rate (gross amounts including any CDI elements).	From (date) D D M M Y Y Other benefits durin From (date) D M M Y Y	To (date) D D M M Y Y D D M M Y Y g the tax year 202	Complete question C2 if applicable and sign and date the declaration overleaf.	
Yes, for part of the year – fill in the start and end dates in the boxes provided C2 - Adult 1 named above was in receipt of Carer's Allowance (including any CDI elements) Contribution-based Employment and Support Allowar Contribution-based Jobseeker's Allowance (excluding any amounts of JSA[IB]) Incapacity benefit – short term higher rate (gross amounts including any CDI elements). Exclude Incapacity Benefit claimed before 1995 Incapacity benefit – long term higher rate	From (date) D D M M Y Y Other benefits durin From (date) D M M Y Y	To (date) D D M M Y Y D D M M Y Y g the tax year 202	Complete question C2 if applicable and sign and date the declaration overleaf.	
Yes, for part of the year – fill in the start and end dates in the boxes provided C2 - Adult 1 named above was in receipt of Carer's Allowance (including any CDI elements) Contribution-based Employment and Support Allowance (excluding any amounts of JSA[IB]) Incapacity benefit – short term higher rate (gross amounts including any CDI elements). Exclude Incapacity Benefit claimed before 1995 Incapacity benefit – long term higher rate (gross amounts including any CDI elements). Exclude Incapacity Benefit claimed before 1995 Exclude Incapacity Benefit claimed before 1995	From (date) D D M M Y Y Other benefits durin From (date) D D M M Y Y D D M M Y Y D D M M Y Y D D M M Y Y D D M M Y Y	To (date) D D M M Y Y D D M M Y Y G the tax year 202 To (date) D D M M Y Y D D M M Y Y D D M M Y Y D D M M Y Y	Complete question C2 if applicable and sign and date the declaration overleaf. 22-23 as follows: Weekly rate £ £ £ £ . p p £ £ £ £ . p p £ £ £ £ . p p	
Yes, for part of the year – fill in the start and end dates in the boxes provided C2 - Adult 1 named above was in receipt of Carer's Allowance (including any CDI elements) Contribution-based Employment and Support Allowar Contribution-based Jobseeker's Allowance (excluding any amounts of JSA[IB]) Incapacity benefit – short term higher rate (gross amounts including any CDI elements). Exclude Incapacity Benefit claimed before 1995 Incapacity benefit – long term higher rate (gross amounts including any CDI elements). Exclude Incapacity Benefit claimed before 1995 Bereavement Allowance If the person claimed any of the above benefits for more	From (date) D D M M Y Y Other benefits durin From (date) D D M M Y Y D D M M Y Y D D M M Y Y D D M M Y Y D D M M Y Y	To (date) D D M M Y Y D D M M Y Y G the tax year 202 To (date) D D M M Y Y D D M M Y Y D D M M Y Y D D M M Y Y	Complete question C2 if applicable and sign and date the declaration overleaf. 22-23 as follows: Weekly rate £ £ £ £ . p p £ £ £ £ . p p £ £ £ £ . p p	

RSS PAGE 1 OF 2

Check the other side of this page, complete for Adult 2 (if applicable) and sign and date the declaration overleaf.

Enter your details below it you received social se	curity benefits between 6 April	2022 and 5 April 2023 (tax year 2022-23).
Adult 2			
Surname:	National Insurance number:		
First Name:	Relationship to Student:		
Address:	Student.		
	alianta a infanonation na acadina		
I authorise the Department for Work and Pensions to my benefits and allowances for the purposes of asse		Sign here	
Residential Support Scheme.			
For DWP office use only - do not write below this	line.		
00 Ad 110d-lb			
C3 - Adult 2 named above was in receipt of related Employment and Support Allowa	• • •		•
Yes, for the whole year You do	not need to complete any further	guestions Sign and date	the declaration below
Tes, for the whole year			the decidiation below.
Yes, for part of the year – fill in	From (date)	To (date)	Complete question C4 if applicable and
the start and end dates in the boxes provided			sign and date the declaration below.
		D D M M Y Y	deciaration below.
C4 - Adult 2 named above was in receip	ot of other benefits durin	g the tax year 202	2-23 as follows:
	From (date)	To (date)	Weekly rate
Carer's Allowance (including any CDI elements)	D D M M Y Y	D D M M Y Y	£ £ £ p p
Contribution-based Employment and Support Al	lowance DDMMYY	DDMMYY	£ £ £ . p p
Contribution-based Jobseeker's Allowance (excluding any amounts of JSA[IB])	DDMMYY	DDMMYY	£ 2 2 2 p p
Incapacity benefit – short term higher rate (gross amounts including any CDI elements). Exclude Incapacity Benefit claimed before 1995	D D M M Y Y	D D M M Y Y	£ £ £ . p p
Incapacity benefit – long term higher rate (gross amounts including any CDI elements). Exclude Incapacity Benefit claimed before 1995	D D M M Y Y	D D M M Y Y	£ £ £ £ p p
Bereavement Allowance	D D M M Y Y	D D M M Y Y	£ £ £ £ p p
If the person claimed any of the above benefits for claim and the weekly rate in the boxes below.	or more than one period write in	n the type of benefit, th	e period(s) of the
	D D M M Y Y	D D M M Y Y	2 2 2 p p
	D D M M Y Y	D D M M Y Y	£ £ £ £ p p
Now sign and stamp the form and return it to Adult	1 named overleaf.		
I confirm the benefit details entered on this for			
DWP officer initial and surname:	in are correct.		
Signature:		DWD	fice eterms bess
Oignature.		DWP of	fice stamp here
Date:	M M 2 0 Y Y		

PAGE 2 OF 2