Social Welfare Services **COVID-UP** Data Classification R



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 maximum of SIX weeks. First Name Surname PPS No Mothers Birth Surname Address County **Phone Number** E-mail address: Date of Birth Employer name, address and phone no. Why did this job finish? _____ Last day worked/paid to: /2020 Are you still working casually, part-time etc.? Yes Are you in receipt of another weekly Social Welfare payment? Yes No **Bank Account Details Bank Name** Account Name **BIC IBAN** 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. Date: / /2020 Signed: Claimant's Signature Post this form back to FREEPOST 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 www.gov.ie/deasp/privacystatement 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:	