Application for parental allowance

according to the Federal Parental Allowance and Parental Leave Act - BEEG

for births from September 1st, 2021.

Please note that parental allowance is only available from birth at the earliest and retroactively for a maximum of the last thre<u>e months</u> is paid before the month in which the application is submitted.

1	Child for whom parental allowance is applied for Please enclose ORIGINAL birth certificate with the intended purpose "parental allowance" or "social purposes".				
Family name:			First name:		
Birth date:			Place of birth:		
In the cas	se of multiple births: Number of children:		First names of the other multiple children:		
	n and adoptive foster care cases, the <u>child's birth</u> application is require <u>d for multip</u> le births.	day is replaced by the da	<u>y t</u> he child is accepted into the household.		
2	Personal details of the ap	plicant parent			
Gender:	/ female ÿ male ÿ diverse ÿ not specified (Sect	ion 22 Paragraph 3 of th	e Personal Status Act (PStG))		
Last nam	e:		First name:		
Birth Nan	ne:		Birth date:		
Street, ho	buse number:		Zip Code Residential Address:		
Telephon	e number:		E-mail address:		
Profession:			Tax identificationnumber:		
Marital s	tatus:				
ÿ single	ÿ married	ÿ registe	ered civil partnership		
ÿ divorce	d/permanently separated, since ÿ	widowed, since			
Unmarrie	d living with the other parent:		ÿ yes ÿ no		
Single pa	rent according to Section 24 b of the Income T	ax Act (EStG): ÿ yes ÿ n	0		
National i ÿ Germar	-				
ÿ EU/EEA	A country/Switzerland:				
-		are no proceedings un	derway to revoke my freedom of movement.		
ÿ I am entitled to freedom of movement and there are no proceedings underway to revoke my freedom of movement.					
ÿ Other:ÿ Please present a copy of your passport (including residence permit) or a certificate from the immigration authority Residence/usual residence:					
since ÿ Reason: (Day month Year)					
NATO troop, diplomat or civilian personnel: ÿ yes, yourself ÿ yes, my partner					
3	Bank details The parental allowance should be transferred to the following account, which I am authorized to use:				
exact nar	ne of the financial institution:	IBAN:			
BIC (SWI	FT-Code:	Account holder (only	/ if not the same as the applicant):		
(only for foreign payments)					

	y tick one v ne	r month of life. N	lotes on deter					
nonth	Basic	Parental						
of life	parental	Allowance Plus	Partnership be	To help you plan your benefit months, you can find information and a parental allowance calculator on the http://glowing website of the Federal Ministry for Family, Senior Citizens, Women and Youth:				
child				https://familienportal.de/familienportal/meta/egr				
1.	ÿ	ÿ	ÿ	Parents can choose between basic parental allowance and parental allowance Plus. Basic parental allowance				
2.	ÿ	ÿ	ÿ	and parental allowance Plus can also be combined.				
3.	ÿ	ÿ	ÿ	As long as you do not work after the birth of your child, basic parental allowance is generally recommended; if				
4.	ÿ	ÿ	ÿ	you work part-time during the reference period, parental allowance plus is often recommended. Example				
5.	ÿ	ÿ	ÿ	calculations for Parental Allowance Plus can be found in the explanations.				
6.	ÿ	ÿ	ÿ					
7.	ÿ	ÿ	ÿ	$\ddot{\textbf{y}}$ The reference months are based on the months of the child's life, not on				
8th.	ÿ	ÿ	ÿ	Calendar months (see explanations for No. 4).				
9.	ÿ	ÿ	ÿ	ÿ If there is a right to maternity benefits or				
10.	ÿ	ÿ	ÿ	Insurance benefits in accordance with Section 192 Paragraph 5 Sentence 2 If the Insurance Contract Act exists, these times apply to the mother				
11.	ÿ	ÿ	ÿ	automatically as a reference period for basic parental allowance. This leads to one				
12.	ÿ	ÿ	ÿ	corresponding reduction in the months in which Parental Allowance Plus				
13.	ÿ	ÿ	ÿ	can be obtained.				
14.	ÿ	ÿ	ÿ	Basic parental allowance				
15.	ÿ	ÿ	ÿ					
16.	ÿ	ÿ	ÿ	ÿ Basic parental allowance can only be received within the first 14 months of the child's life				
17.	ÿ	ÿ	ÿ	be obtained. ÿ The parents are jointly entitled to a total of 12 monthly payments				
18.	ÿ	ÿ	ÿ	Basic parental allowance, which can be divided among each other.				
19.	1	ÿ	ÿ	ÿ The maximum benefit period for a parent is 12 months and the minimum period is 12 months				
20.		ÿ	ÿ	2 months.				
21.		ÿ	ÿ	Parental Allowance Plus				
22.		ÿ	ÿ					
23.		ÿ	ÿ	ÿ Instead of 1 month of basic parental allowance, 2 months of parental allowance Plus can be received,				
24.		ÿ	ÿ	An odd number of reference months is also possible.				
25.	5. 	ÿ	ÿ	ÿ The amount of parental allowance Plus is a maximum of 50% of the basic parental allowance, which is due without taking into account earned income in the reference month				
26.		ÿ	ÿ	would.				
27.		ÿ	ÿ	ÿ The joint entitlement of both parents is a maximum of 24 months				
28.		ÿ	ÿ	can be divided among each other.				
29.		ÿ	ÿ	ÿ The maximum period a parent can receive parental allowance plus is 24 months Minimum subscription period 2 months.				
30.		ÿ	ÿ	ÿ From the 15th month of life onwards, there should be no gap in which there is not at least one Parent receives Parental Allowance Plus.				
31.		ÿ	ÿ					
32.		ÿ	ÿ	ÿ Parental Allowance Plus can be received up to a maximum of 32 months of age become.				
		y	y					
				Partner months				
				 ÿ With the partner months, the above total entitlement of both parents can be increased by 2 Months in basic parental allowance or by 4 months in parental allowance plus can be increased. The prerequisite for taking advantage of the partner months is that everyone parent claims parental allowance for at least two months and that at least one parent's income after the birth for at least 2 Months reduced. ÿ For single parents, the possible entitlement to parental allowance increases accordingly, provided that there is a reduction in income for at least 2 reference months entry. 				
artnorchi	n honus (in a	ddition to basic	narontal allo	vance, parental allowance Plus and partner months)				
ÿ Bot	h <u>paren</u> ts can at least 2 con are employed nly one parent	receive 2 to 4 a secutive months I. claims the bonu	dditional month s at the same ti us months, the o	s of Parental allowance Plus as partnership bonus months if <u>they are</u> in me with 24 t <u>o 32 hours pe</u> r week on average per month of life other parent must still do so for exactly this period ership bonus months and the hourly range of 24 to 32 hours per week				
partners	gle parents ca are employed hip bonus mo	for between 24	and 32 hours ped for, the other	kimum of 4 additional months if they themselves are in 4 per week on average per month of life in consecutive reference months. r parent must fill out the "Declaration for applying for partnership bonus months" (see time.				
<u>xtra moní</u>	hs for prema	ture births						
see explar	nations for No.	4)						
	from 6 weeks		f	rom 8 weeks from 12 weeks from 16 weeks				
+ 1 month basic parental allowance or+ 2 months+ 2 months parental allowance plus+ 4 months P				basic parental allowance or + 3 months basic parental allowance or + 4 months basic parental allowance or				

The originally set expected day of delivery is decisive for calculating the premature birth deadlines. Please provide proof of this with a medical certificate or a certificate from a midwife or maternity nurse. As a rule, the expected date of delivery can be found in the maternity record.

5	Sole care by one parent						
Please	Please answer if a parent is applying for partner months and/or partnership bonus months alone :						
ÿI	am a single parent ÿ Please attach: a current payslip with tax of	lass II or	proof from the tax office that				
	You meet the requirements for the relief amount	-					
ir you canr	not provide a current payslip with tax class II or a certificate from the tax office, please f	ill out the dec	laration for single parents.				
ÿТ	he child lives at least one third in the other parent's household.						
	(If at least one third of the child also lives in the other parent's household, the appendix is r to fill out. No further evidence needs to be attached. The signature of the other parent see						
ÿC	ÿ Care of the child by the other parent is impossible (especially due to illness or death) or endangers the well-being of the child. ÿ Please attach relevant evidence						
	Declaration on how to apply for partnership bon	us month	S				
6	This declaration (AC) must be completed by the other parent (not the applicant). If an appli filled out.	ication from the	e other parent has already been submitted, this declaration does not need to be				
	Personal information of the other parent						
	Last name:		First name:				
	Profession:						
3	Netionality						
	Nationality:						
A							
	ÿ EU/EEA country/Switzerland:						
	ÿ I am entitled to freedom of movement and there are no proceedings underway to revoke my freedom of movement.						
	ÿ Other:ÿ Please present a copy of your passport (inclu	uding reside	ence permit) or a certificate from the immigration authority				
	Residence/usual residence:						
	ÿ in Germany since ÿ my birth	ÿ abroad	l since until				
	since ÿ (Day month Year) Reason:						
	Information about living with the child during the partner	Information about living with the child during the partnership bonus months					
b	ÿ I live in a household with the child for whom parental allowance is being applied for.						
		ÿ I look after and raise the child myself.					
	Declaration of working hours in the partnership bonus m						
	Be gainfully until	l will	weekly hours in				
	employed during the monthly average period. ÿ Please provide proof of your part-time work once approved.						
с	(To calculate the monthly average, the child's month of life is used and not the calendar month.)						
	A notice:						
	In order for partnership bonus months to be granted, you must ÿ both parents at the same time						
	ÿ in 2 to 4 consecutive months of life ÿ Between 24 and 32 hours per week on average per month						
	pursue gainful employment. Please make sure to submit your own parental allowance application in good time.						
7	Registration of the other parent's reference period						
ÿ The o	ther parent files a claim to:	ÿ The ann	lication will be submitted at a later date				
 reference months of basic parental allowance reference months of receipt of Parental Allowance Plus ÿ The application will be submitted at a later date. ÿ The application is attached. 							
months of receipt of Parental Allowance Plus							
ÿ The other parent is already receiving parental allowance under the business name							
		ionip/acti	,				
 ÿ I have an employment relationship in Germany or am self-employed in Germany. ÿ I have an employment relationship abroad or am self-employed abroad, Country of employment:							
ÿ My partner has an employment relationship in Germany or is self-employed in Germany.							
ÿ My partner has an employment relationship abroad or is self-employed abroad.							
Country of employment:							

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	9	Childhood relationship				
	ÿ Adopte ÿ Child i ÿ Other	 ÿ Biological child ÿ Adopted child ÿ Child in adoption care ÿ Other child relationship (e.g. grandchild): ÿ Non custodial parent ÿ Please attach the court's acceptance decision ÿ Please attach the court's acceptance decision ÿ Please confirm from the youth welfare office Attach adoption agency 				
	10	Domestic community with the	child			
I	The chil	d lives exclusively in my household: ÿ yes	ÿ no, because			
	11	Care and education of the	ne child			
	The chil	ild is looked after and raised by myself: ÿ yes, constantly from birth ÿ no, because				
	12	Health insurance of the applicant parent				
	l am ÿ c	compulsorily insured ÿ voluntarily insured ÿ privately insured, with entitlement to daily sickness benefit ÿ yes ÿ no ÿ not insured ÿ co-insured as a family member with:	Name of the health insurance company Address of the health insurance company			
		(e.g. spouse, parents)	Membership no.			
	13	Assessmer	nt period			
		ompleted tax in the 12 months before my child's birth r ment period before the birth of the child:	nonth and/or in the last			
	A	 ÿ Income from self-employment or Commercial business or agriculture and forestry relatives includes negative income) If applicable, no information under point B is required. ÿ Income from self-employment or Commercial business or agriculture and forestry <u>and</u> non-self-employed employment (This also includes negative income) 	ÿ Please fill out the declaration for self-employed people ated ÿ Please fill out the declaration for self-employed people			
		If applicable, no information under point B is required. Income from small photovoltaic systems (up to 10 kW) and comparable combined h power plants (up to 2.5 kW) can be exempt from tax. This means that there is no need to take parental allowance into account. If you hav earned or do not earn any other income from self-employment, business and/or agri forestry, you will be treated in the same way as an exclusively employed person unc allowance law.	e not culture and			
	In the 12 I	months before my child's birth month I have :				
Ī		ÿ did not receive any income from employment	ÿ No evidence is required.			
	b	 ÿ Income from employment employment related (Wage, salary, income from mini-job/midi-job, transition fees, waiting compensation, etc., monetary benefit e.g. through private use of a company car) 	ÿ please attach the pay slips issued for the 12 months before the month of birth; if you are receiving ongoing maternity benefit or have one employment ban according to Section 3 of the Maternity Protection Act the issued payslips for the 12th Months before the start of the maternity leave period.			
		ÿ Additionally, I have in the twelve months before birth from to	ÿ please provide additional pay slips for the 12th Attach monthly period, according to the number of Months for which the following benefits are received became			
		ÿ Received maternity benefit	ÿ Please present the benefit notification			
		ÿ Parental allowance received for an older child	ÿ Please present the benefit notification			
		ÿ suffered a loss of income ÿ through a	ÿ Please provide a medical certificate			
		pregnancy-related illness ÿ through military/civil service	ÿ Please provide a certificate of duration			
		These months are then not used to calculate parenta completely or partially waived. See also explanations	I allowance. The exclusion of these months can be			
		ÿ I request that the following months nevertheless for the assessment period should be used:				

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	ÿ I have due to the Covid-19 pandemic suffered a loss of income between March 1st, 2020 and December 31st, 2021 and request that the following calendar months be excluded from the assessment period:	ÿ Please submit an employer certificate stating that you are due to the Covid-19 pandemic lower income in the areas you are referring to months requested for exclusion, and one Proof of lower income
	 ÿ I have this because of the Covid-19 pandemic Parental allowance payment for my older child has been postponed. I originally planned these months to be before I turned 14. month of the older child's life. I request the following months in Assessment period to be excluded: 	 ÿ Please submit the change notice for your older child, in which the reference months that you postponed due to the Covid-19 pandemic are approved. (You can find further information in the explanations on the special regulations due to the Covid-19 pandemic)
14	Maternity benefit / employer subsidy / comparable benefits	
The follow	ing benefits are or were received by the mother:	
Maternity I	benefit as an ongoing payment ÿ yes ÿ no	ÿ Please present the certificate from the health insurance company
Employer	subsidy during the maternity leave period ÿ yes ÿ no ÿ please provide a certific	ate from the employer (payroll/payroll).
Service or	candidate salaries after childbirth ÿ yes ÿ no ÿ please provide the salary notifi	cation and certificate from Submit to your employer about the duration of the protection period
Foreign fa	mily benefits ÿ yes ÿ no ÿ pleas	e present the certificate
15	Activity/income in the reference period	
	nce period is the period after the birth of the child for which parental allowance is a the child's life, not calendar months.	pplied for. The reference months are based on
-	t have any gainful employment during the parental allowance benefind to the parental allowance benefind to the parent of the p	t period
ÿ I am em	ployed during the reference period	ÿ Please provide confirmation from the employer about the start of part-time work and the number of
From sinc From sinc		Hours per week and proof of expected income
emplo (Wage,	income from employment during the reference period yment. salary, income from mini-job/midi-job, transition fees, waiting compensation, etc., m e.g. through private use of a company car)	ÿ Please present the pay slips onetary
from	acation during the reference period: days cation results from an activity with weekly hours.	ÿ Please provide confirmation from your employer ÿ Please present the pay slip
ÿ a vo	gher) school education, vocational training ocational training measure nce: estimated end:	ÿ Please attach proof
ÿ During th or an a	me reference period I am self-employed, running a business, gricultural and forestry activity nce: with weekly hours.	$\ddot{\boldsymbol{y}}$ Please fill out the declaration for self-employed people
self-en Foresti	acome from one during the reference period aployed activity, from a commercial business or from agricultural and ry. o includes negative income)	\ddot{y} Please fill out the declaration for self-employed people
-	Ceive income replacement benefits during the reference period.	ÿ Please include the current benefit notification Short-time working allowance the last payslip add
	f service: (Day month Year)	(Changes in the amount of the payment must be reported immediately)

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16		More children							
Number of	Number of all children living in the household:								
		siblings, insofar as thes s paid, please see the expla	•	sibling bonus:					
Name first Name:				Name first Name:					
ÿ One	ÿ One of the aforementioned children has a disability. ÿ Please provide proof of the degree of disability								
17			E income l	limit					
Act in the €300,000 f This detern employmer	There is no entitlement to parental allowance if the taxable income within the meaning of Section 2 Paragraph 5 of the Income Tax Act in the last completed assessment period before the birth of the child exceeds €250,000 for an eligible person (single parent) or exceeds €300,000 for couples. This determination is based on the total income from the seven types of income under tax law (total income from agriculture and forestry, business, self- employment, employment, Capital assets, rental and leasing and other income in accordance with Section 22 EStG)								
For single	parents			For couple communiti	es				
My income	in the year b	pefore the birth is		Our income in the year	before the birth is				
over one too taxable Income fro		ÿ over one to taxable Income from €250,000.	ÿ expected in the area of one to be taxed Income from €250,000	ÿ certainly not over one too taxable Income from €300,000.	ÿ over one to taxable Income from €300,000.	ÿ expected in the area of one to be taxed Income from €300,000			
ÿ The tax a	assessment is	s attached.	ÿ A tax :	assessment is not yet ava	lable.				
18		Le	gal representative or ca	arer					
-	•	s or carers, the following a of guardianship if neces		equired:					
Last name	:	Firs	t name:	Telephone	number:				
Street, hou	ise number:		Zip Code R	esidential Address:					
19	Hints								
Explar due to ÿ The inform § 67a Proces You ca ÿ Anyone who state th Failure to Failure to y Is parenta has be (fine re	hations on pa the Covid-19 nation you rea Tenth Book o ssed and stor on find out mor o applies for so he necessary to provide service al allowance u een granted, t egulation) in o	rental allowance due to the pandemic. quest is necessary for the of the Social Code (SGB X red in accordance with the re about this in the informati cial benefits must, in accorda r facts and provide the req res in whole or in part in accorda infair due to incorrect, inco he amount wrongly obtain conjunction with Section 6	e Covid-19 pandemic and decision on your applicat and the provisions of the EU General Data Protect on sheet on the EU GDPR nce with Section 60 of the Fin uested evidence, otherwit ance with Section 66 SGB I. complete, omitted or delayund and will be reclaimed. In the 0 SGB I, administrative o	2. You can find information d please also note the app tion. The data is according e BEEG, as well as in acc ction Regulation (EU-GDPF from your responsible parer rst Book of the Social Code (S ise the service provider ca ed information or notification his case, according to Sec fifense proceedings can be in the application imme	to ordance with the R). Detailed information ttal allowance office. GB I), be responsible for the n ons tion 14 BEEG i initiated.	factual clarification			

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FINAL STATEMENT

I agree that the parental allowance office may obtain further information from the tax office if this is necessary for the decision. ÿ yes ÿ no

It is assured that the above information and the income declaration are correct and complete and that no further application for payment of parental allowance has been/will be made to another authority for the same period for the child for whom parental allowance is sought in the application.

Note: The signature of the partner or other parent is required. With the signature, the determination of the reference periods is agreed and the information on family income is confirmed.

place, date

Signature of the applicant

Signature of partner or other parent

Legal signature Representative/caregiver

Please do not attach evidence stapled or stapled!