

Application for family allowances for a salaried employee (paid by the employer)

	Employer
Affiliate number	Company name

To be filled in by the claimant

If the children are born of several unions, please fill in a questionnaire for each union.

	☐ Ms.	☐ Mr.
Surname / First name		
Private address		
Street / No.	Post code / Place	Phone
NSS no. > replaces AVS no.	Date of birth	Nationality
		> if you are a non-EU national, please enclose a copy of your residence permit

Civil status

☐ Single	☐ Married	☐ Registered partnership
☐ Separated	☐ Divorced	☐ Widower / widow

As of (date)

For divorced or single parents : who has parental authority ?

☐ Mother	☐ Father	☐ Shared
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Is your salary higher than that of the child's other parent ?

> in certain cases, the person with the higher salary receives the allowance

☐ yes ☐ no

Do you have a second employer ?

☐ yes ☐ no

If yes, name of employer

Company name	Street / No.	Post code / Place
Employment rate (%)	Canton / country of work	As of (date)

Does your second employment pay you
a higher salary than your first ?

☐ yes ☐ no

Information regarding the other parent

☐ Spouse
 ☐ Former spouse
 ☐ Common-law spouse
 ☐ Registered partner
 ☐ _____ Other

 Surname / First name
 ☐ Ms.
 ☐ Mr.

Private address

 Street / No.

 Post code / Place

 NSS no. > if known

 Date of birth

 Nationality
 > if you are a non-EU national, please enclose a copy of your residence permit

Civil status

☐ Single
 ☐ Married
 ☐ Registered partnership
☐ Separated
☐ Divorced
☐ Widower / widow

 As of (date)

Employment status

☐ Employee
☐ Without gainful employment
☐ Unemployed
☐ Self-employed
☐ Self-employed farmer

 As of (date)

 Employment rate (%)

 Canton / country of work

If you have an employee's salary or equivalent (daily sickness / disablement benefits, paid holidays, a progressive pre-retirement pension, remunerated vocational training):

Employer's name

 Company name

 Street / No.

 Post Code / Place

Do you have a second employer?
☐ yes
☐ no

If yes, name of employer

 Company name

 Street / No.

 Post code / Place

 Employment rate (%)

 Canton / country of work

 As of (date)

Children for whom the allowance is requested

Surname and first name	Date of birth	Each child's address > if different from that of the claimant	Child's income in his / her own right > salary, annuities, daily benefits, income from assets	Is the child ?				
Child's NSS no. > see the Swiss health insurance card	Sex ☐ M ☐ F			from the marriage	from a former marriage	out of wedlock	a child of the spouse	a foster or an adopted child
			CHF	☐	☐	☐	☐	☐
	☐ M ☐ F		CHF	☐	☐	☐	☐	☐
	☐ M ☐ F		CHF	☐	☐	☐	☐	☐
	☐ M ☐ F		CHF	☐	☐	☐	☐	☐
	☐ M ☐ F		CHF	☐	☐	☐	☐	☐

If you are claiming the birth allowance

Was the mother domiciled in Switzerland during the 9-month period prior to the birth ?

☐ yes ☐ no

The allowance is requested as of (date) :

Reasons

 The undersigned certifies that he / she has replied accurately and fully to all the above questions.
 He / she recognises the compensation fund's right to claim the refund of unduly paid allowances.

 Place and date

 Signature

To be filled in by the employer

The employer certifies that he / she has employed him / her

_____ from (date) _____ to > if applicable

_____ Canton / country of work _____ Employment rate (%) _____ Monthly salary

Type of permit > if a foreigner

- ☐ A (seasonal) ☐ B (residence) ☐ C (permanent residence) ☐ F (provisional)
☐ G (border resident) ☐ N (asylum seeker) ☐ L (short stay)

_____ Place and date _____ Stamp and signature

Applications will not be taken into consideration unless accompanied by the supporting documents requested. In some cases, the compensation fund may request additional information and / or documents.

Supporting documents to be enclosed (photocopies)

The following must be included with each application for family allowances :

In all cases :

- ☐ family record book or full family certificate ; failing this, the marriage certificate and the children's birth certificates ;
- ☐ for foreigners (except permit C holders) : the record books for foreigners or a recent certificate of the place of residence **for the whole family** issued by the resident registration office (contrôle des habitants) ;
- ☐ for children domiciled outside Switzerland, an attestation of non-payment of family allowance in the country of domicile.

In the case of unemployment :

- ☐ copy of the most recent statement of unemployment benefits.

In the case of separation or divorce :

- ☐ copy of judiciary measures indicating the date and to whom parental authority and custody of the children was granted.

For the children of unmarried parents :

- ☐ certificate of recognition, if applicable ;
- ☐ parental authority agreement, if applicable.

For children from 16 to 20 years of age unable to work due to an illness, accident or disability :

- ☐ certificate attesting to the child's incapacity to work or a disability insurance (AI) decision.

For children up to 25 years of age, students or apprentices :

- ☐ certificate from the education establishment indicating the period of studies ;
- ☐ apprenticeship contract ;
- ☐ work experience certificate indicating the monthly salary and the period of work.