Relationship details
Separated under one roof

How do we assess your relationship? The Australian Government Department of Human Services will assess your relationship based on the following 5 factors:
- financial arrangements
- nature of the household
- social aspects of the relationship
- presence or absence of sexual relationship
- nature of commitment.

We are collecting information on this form that we will use to make sure we assess your correct entitlement to payment at either the single or partnered rate.

Relationships and safety concerns
If you need to advise a change in your living arrangements or relationship and you are concerned about your safety, there may be help we can provide. We can support you if you are in, have left, or are preparing to leave a family and domestic violence situation.

For more information, go to humanservices.gov.au/domesticviolence

If you cannot answer the questions
It is important that you answer all the questions and give as much detail as you can. If you are unable to give any of the information asked for, please say so on the form. There are penalties for giving false or misleading information.

Online Services
You can access your Centrelink online account through myGov. myGov is a simple and secure way to access a range of government services online with one username and password. You can create a myGov account at my.gov.au and link it to your Centrelink online account.

Definition of a partner
Under social security and family assistance law, a person is considered to be your partner if you and the person are:
- married, or
- in a registered relationship (different-sex or same-sex), or
- in a de facto relationship (different-sex or same-sex),
and you and the person are not living separately and apart on a permanent or indefinite basis.

Note: Two people not physically living together can still be considered a member of a couple.

We generally consider a person to be in a de facto relationship from the time they commence living with another person as a member of a couple.

We recognise all couples, different-sex and same-sex.

For more information, go to humanservices.gov.au/moc

Filling in this form
- Please use black or blue pen.
- Print in BLOCK LETTERS.
- Mark boxes like this ☑️ with a ✔️ or ✗.
- Where you see a box like this ☐ Go to 5 skip to the question number shown. You do not need to answer the questions in between.
Returning your form

Check that all required questions are answered and that the form is signed and dated.

**Important Note:** If you are making a claim, you must return this form and all supporting documents at the same time you lodge your claim form. If you do not return all documents, your claim may not be accepted. The only exception will be if you are waiting for medical evidence or other documents from a third party.

You can return this form and any supporting documents:

- online – submit your documents online (excluding identity documents). For more information about how to access an Online Account or how to lodge documents online, go to [humanservices.gov.au/submitdocumentsonline](https://humanservices.gov.au/submitdocumentsonline)
- by post – return your documents by sending them to:
  - Department of Human Services
  - Reply Paid 7802
  - CANBERRA BC ACT 2610
- in person – if you are unable to submit this form and any supporting documents online or by post, you can provide them in person to one of our service centres.

For more information

Go to [humanservices.gov.au/moc](https://humanservices.gov.au/moc) or call on:

- ABSTUDY 1800 132 317
- Disability and Carers 132 717
- Employment Services 132 850
- Families 136 150
- Older Australians 132 300
- Youth and Students 132 490

or visit one of our service centres.

If you need a **translation** of any documents for our business, we can arrange this for you free of charge.

To speak to us in languages other than English, call 131 202.

**Note:** Call charges may apply.

If you have a hearing or speech impairment, you can contact the **TTY service** on Freecall™ 1800 810 586. A TTY phone is required to use this service.
3 Please read this before answering the following questions.

Some questions on this form are about your relationship with the other person. Where the words “the other person” appear, they refer to the person named below.

Other person’s details
Other person’s family name

Other person’s first and second given name(s)

Other person’s date of birth

Other person’s phone number

4 Have you been married to, or been in a registered relationship or in a de facto relationship with the other person?

No Do not complete this form.
Call us on the number relevant to your payment listed on page 2.

Yes Go to next question

5 Are you separated from the other person?

No Do not complete this form.
Call us on the number relevant to your payment listed on page 2.

Yes Go to next question

6 Are you living at the same address as the other person?

No Do not complete this form.
Call us on the number relevant to your payment listed on page 2.

Yes Go to next question

7 When did you separate from the other person?

8 Have you lived at different addresses from each other at any time since separating?

No Go to next question

Yes Give details below
Reason and duration of the separate addresses

9 How long do you intend to live at the same address with the other person?

10 Give the reason(s) why you intend to live with the other person for this length of time.

11 Do you think that there is any possibility that you and the other person will get back together again?

No Go to next question
Not sure Give details below
Yes Give details below
Details of when you will get back together again

CLKOSS293 1707
12 Since separating, how has your relationship changed and how does it differ to that of a married, registered or de facto couple?

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13 Have you applied to legally terminate your relationship?

- Not ☐ Go to next question
- No ☐ Explain why not
- Yes ☐ Give details of the action taken and the date the application was made

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14 Since separating, have you and the other person claimed to be a member of a couple for any reason?

- No ☐ Go to next question
- Yes ☐ Give details below

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15 Do you or the other person own the home you currently live in (including paying it off)?

- No ☐ Go to 22
- Yes ☐ Give details below
  - Home is jointly owned with the other person ☐ Go to 16
  - I solely own the home ☐ Go to 20
  - Home is jointly owned with a third party ☐ Go to 20
  - Home is owned by the other person ☐ Go to 19

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16 Who pays for the following?

- The council rates
- The water authority

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17 Is your home still being paid off?

- No ☐ Go to next question
- Yes ☐ What are the total mortgage repayments? $ per month
  - How much of this do YOU pay? $ per month
  - Attach your latest loan account statement.

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18 Has the home been listed for sale?

- No ☐
- Not yet but plan to list ☐
- Yes ☐

---

19 Have property settlement proceedings commenced?

- No ☐ Go to next question
- Yes ☐ Give details of progress

---

20 Since your separation have there been any structural alterations to the home?

- No ☐ Go to 25
- Yes ☐ Give details of the alterations

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21 Were the alterations jointly financed?

- No ☐ Go to 25
- Yes ☐ Who financed them?

- Go to 25
22 Do you pay rent at the place where you currently live?
No  Go to 24
Yes  Give details below
Name and address of the person or business the rent is paid to

... .................................................................
... .................................................................
Postcode

What is the total amount of rent you (and the people who live with you) pay?

$ per week

How much of this do YOU pay?

$ per week

24 Do you pay board and/or lodgings at your current address?
No  Go to next question
Yes  Give details below
Name and address of the person or business you make this payment to

... .................................................................
... .................................................................
Postcode

What is the amount YOU pay?

$ per week

25 Do you share any other real estate assets jointly with the other person, such as investment properties, business properties, caravan sites or moorings?
No  Go to next question
Yes  Give details below

... .................................................................
... .................................................................

26 Does anyone else, including the other person, pay for accommodation at your current address?
No  Go to next question
Yes  Give details below

How much does each person pay and how often?

$ per

If there are more than 3 other people who pay, attach a separate sheet with details.

27 Have you indicated that you own, or pay rent or board/lodgings for the place where you currently live?
No  Go to next question
Yes  Go to 29

28 Give details about why you do not pay for your accommodation.

... .................................................................
... .................................................................

29 Do you or the other person pay for accommodation at any other address?
No  Go to next question
Yes  Give details below
Other address

... .................................................................
... .................................................................
Postcode

What is the amount paid for this accommodation?

$ per week

30 Does the place where you live have more than one living area such as a granny flat, caravan or converted garage?
No  Go to 32
Yes  What type of living area?

Tick ALL that apply

Granny flat
Caravan
Converted garage
Other  Give details below

Attach proof (if available) such as documents relating to structural changes in the home (e.g. council approvals, building permits).
31 Give details of who lives in the additional living area(s).

[Box for details]

32 Do you and the other person eat together at meal times?
   No  [Go to next question]
   Yes  [How often?]

33 Do you and the other person prepare meals for each other?
   No  [Go to next question]
   Yes  [Give details below]
   How often and why?

[Box for details]

34 Do you and the other person use the same kitchen?
   No  [Give details on how you and the other person access a kitchen]
   Yes  [Give details on your sharing arrangements]

36 Do you and the other person use the same bathroom?
   No  [Give details on how you and the other person access a bathroom]
   Yes  [Give details on your sharing arrangements]

37 Do you and the other person use the same bedroom?
   No  [Go to next question]
   Yes  [Give details on your sharing arrangements]

38 Are there any other rooms or areas of the home that are for your sole use and not shared with the other person?
   No  [Go to next question]
   Yes  [Describe the areas]

39 Please read this before answering the following questions.

Under social security law, we need to ask the following questions as one of the considerations for assessing your relationship status.

Do you have a sexual relationship with the other person?
   No
   Yes

40 Are you and the other person free to form a sexual relationship with other people?
   No
   Yes
Do you and the other person provide care or practical support/help to each other in any of the following circumstances?

Illness

No \(\rightarrow\) Go to next question

Yes \(\rightarrow\) What sort of activity and how often?

Personal crisis

No \(\rightarrow\) Go to next question

Money matters

No \(\rightarrow\) Go to next question

Family disputes

No \(\rightarrow\) Go to next question

Since separating, do you and the other person holiday together or plan to go on holiday together in the future?

No \(\rightarrow\) Go to next question

Yes \(\rightarrow\) Give details on how often or when

Do relatives, friends or regular associates (including social media contacts) consider you and the other person to be partnered?

No \(\rightarrow\) Go to next question

Yes \(\rightarrow\) Why? Give details below

Are you and the other person invited out as a couple?

No \(\rightarrow\) Go to next question

Yes \(\rightarrow\) Give details of the events or occasions

Do you share social and leisure activities with the other person (e.g. sporting events, family occasions, movies or other activities)?

No \(\rightarrow\) Go to next question

Yes \(\rightarrow\) What sort of activity and how often?

Is the other person employed?

No \(\rightarrow\) Go to next question

Yes \(\rightarrow\) Give details of the other person’s employer

Employer’s name

Address

Postcode

Phone number

Who is listed as the other person’s emergency contact at work?

Do you currently claim the other person as a dependent for taxation purposes?

No \(\rightarrow\) Go to next question

Yes \(\rightarrow\) Is this as a dependent spouse or as a housekeeper?

Tick ALL that apply

Dependent spouse

Housekeeper

What names appear on your Medicare card?

Name 1

Name 2

Name 3

Attach a copy of your Medicare card.
49 Do you and the other person have any joint accounts (including bank, credit and store cards)?
Yes  Go to next question
No  Go to next question

Give details below

| 1 | Name of financial institution the account is held with |
|   | Type of account |
|   | Name(s) account is held in |
|   | Why is this account shared? |

If you have more than 3 current joint accounts, attach a separate sheet with details.

50 Do you have access to any of the other person’s accounts (including bank, credit and store cards)?
Yes  Go to next question
No  Go to next question

Give details below

| 1 | Name of financial institution the account is held with |
|   | Type of account |
|   | Name(s) account is held in |
|   | Why do you have access to this account? |

If you have access to more than 1 account, attach a separate sheet with details.

51 Does the other person have access to any of your accounts (including bank, credit and store cards)?
Yes  Go to next question
No  Go to next question

Give details below

| 1 | Name of financial institution the account is held with |
|   | Type of account |
|   | Name(s) account is held in |
|   | Why does the other person have access to this account? |

If the other person has access to more than 1 account, attach a separate sheet with details.
52 Do you and the other person have any outstanding joint debts on credit cards, hire purchase, store accounts or personal loans?

No  Go to next question
Yes  Give details below

1 Describe the debt type

Date when debt occurred

/  /

Arrangement(s) for repaying this debt

What are the arrangements for separating the debt?

If you have more than 2 debts, attach a separate sheet with details.

2 Describe the debt type

Date when debt occurred

/  /

Arrangement(s) for repaying this debt

What are the arrangements for separating the debt?

53 Since separating, have you and the other person been guarantor for one another?

No  Go to next question
Yes  Give details below

Who was the guarantor?

Date of the guarantee

/  /

54 Give information about the payment of the following household bills.

Phone/Internet:
Do you share the payment of either a land line, internet or mobile phone with the other person?

No  Who pays it?
Yes  What is the arrangement for sharing the payment?

Electricity:
Do you share the payment with the other person?

No  Who pays it?
Yes  What is the arrangement for sharing the payment?

Gas:
Do you share the payment with the other person?

No  Who pays it?
Yes  What is the arrangement for sharing the payment?

Attach a copy of each of the most recent bills.
55. Do you or the other person own a vehicle (e.g. car)?
   - No [Go to next question]
   - Yes [Give details below]

**Vehicle 1**

Is the vehicle jointly owned?
   - No [ ]
   - Yes [ ]

Who owns the vehicle?

When was the vehicle purchased?

/ / 

Registration number

Do you share the use of the vehicle?
   - No [ ]
   - Yes [ ]

Provide details of the sharing arrangements

Who is responsible for the running costs?
   - I am [ ]
   - The other person is [ ]
   - We both are [ ]
   - Third party is [ ]

Who?

56. What are the arrangements for paying for food and housekeeping items for this household?

Who pays?

Who does the shopping?

57. What are the arrangements for doing the following household tasks?

Cleaning

Washing

Gardening

General maintenance

58. Do you and the other person have any jointly owned household goods?
   - No [Go to 60]
   - Yes [Give details below]

59. Have you and the other person made arrangements for the jointly owned household goods should either of you move out?
   - No [Go to next question]
   - Yes [Give details below]

If you (and/or the other person) have more than 2 vehicles, attach a separate sheet with details.
60 Do you and the other person share joint private medical insurance?
- No [ ] Go to next question
- Yes [ ] Give details below

Who pays for the medical insurance?

What are your plans for this policy since separating?

61 Do you and the other person hold any other joint insurance policies together?
- No [ ] Go to 64
- Yes [ ] Give details below

What type of policy is it (e.g. house and/or contents insurance, life insurance, vehicle insurance)?

62 Do you plan to cancel or alter this/these joint insurance policies?
- No [ ] Go to next question
- Yes [ ] Go to 64

63 Give details on why you do not plan to cancel or alter the joint insurance policies

64 Is the other person nominated as a beneficiary under your will, superannuation or life insurance?

- Will
  - Do not have [ ]
  - No [ ]
  - Yes [ ]

- Superannuation
  - Do not have [ ]
  - No [ ]
  - Yes [ ]

- Life Insurance
  - Do not have [ ]
  - No [ ]
  - Yes [ ]

65 Are there children regularly living or staying at your address?
- No [ ] Do not answer questions 66 to 74. Go to 75.
- Yes [ ] Go to next question

66 Give details of those children.

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<th>Child 1</th>
<th>Family name</th>
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If there are more than 3 children who regularly live or stay at your address, attach a separate sheet with details.
67 Do you and the other person both look after the children?
- No □ Go to next question
- Yes □ What are the current care arrangements for the children?

68 Who is the primary carer?

69 How often does the other person visit the school/sporting/leisure outings with, or on behalf of any children?

70 Do you both help decide matters about the education and development of the children?
- No □
- Yes □

71 Are the children aware of your separation?
- No □ Give details below
- Yes □ Go to next question

72 Has the children’s school been made aware of the separation?
- No □ Give details below
- Yes □ Go to next question

73 Have you and the other person discussed or made any child support arrangements?
- No □ Go to next question
- Yes □ What are the arrangements?
  - Private Collect
  - Child Support Collect □ Go to 75

74 Why have you not made any child support arrangements?

75 Do any additional people live or regularly stay with you, or use your accommodation as a base away from home?
- No □ Go to next question
- Yes □ Give details of each person below

1 Full Name

Date of birth / /

What is your relationship to this person?

How often and when do they stay?

1 Full Name

Date of birth / /

What is your relationship to this person?

How often and when do they stay?

If there are more than 2 people who live or regularly stay at your address, attach a separate sheet with details.

76 Is there anything else you would like to tell us about your current circumstances that has not already been covered?
- No □ Go to next question
- Yes □ Give details below
77 Are there any other things that you are not able to write down that you would like to talk about in a phone interview?
No ☐ Go to next question
Yes ☐ Give details below

What is the best phone number to call you on?

( )

What is the best time to call you?

78 Did someone help you complete this form?
No ☐ Go to next question
Yes ☐ Give details below

Name of the person who gave you help

Provide details on why you needed help to complete this form

We may contact you for clarification on any of the information you have provided in this form.

79 Which of the following documents are you providing with this form?

☐ Your latest loan account statement (if you answered Yes at question 17)
☐ Copy of signed current lease or tenancy agreement (if you answered Yes at question 23)
☐ Proof of structural changes (if you answered Yes at question 30)
☐ Copy of Medicare card (see question 48)
☐ Copy of latest statement(s) of your current joint account(s) (if you answered Yes at question 49)
☐ Copy of most recent bills (if you answered Yes at question 54)

80 IMPORTANT INFORMATION

Privacy and your personal information

Your personal information is protected by law (including the Privacy Act 1988) and is collected by the Australian Government Department of Human Services for the assessment and administration of payments and services. This information is required to process your application or claim. Your information may be used by the department, or given to other parties where you have agreed to that, or where it is required or authorised by law (including for the purpose of research or conducting investigations).

You can get more information about the way in which the department will manage your personal information, including our privacy policy, at humanservices.gov.au/privacy

81 Statement

I declare that:
• the information I have provided in this form is complete and correct.

I understand that:
• giving false or misleading information is a serious offence.
• if submitting this document as part of a claim, the claim may not be accepted unless supporting documents are lodged at the same time as the claim. The only exception will be if I am waiting for medical evidence or other documents from a third party.
• the Australian Government Department of Human Services can make relevant enquiries to make sure that correct entitlements are received.
• if I am receiving a payment or benefit from the Australian Government Department of Human Services, I must notify the Australian Government Department of Human Services of any change(s) to this information within 14 days of the change(s) occurring.

Your signature

Date

/  /