

## STAFF-IN-CONFIDENCE (After first entry)

Department of Defence

# Australian Defence Force Reserves Employer Support Payment Scheme

## CDF Approval for Additional Employer Support Payments for Medical, Dental, Nursing or Allied Health Officers

### Claim form for Self Employed Reservists

#### Instructions for completion

#### Introduction

This Employer Support Payment (ESP) claim form is for use by self employed Reservists (*employers must use form AD138-3 Employer's Claim Form*). This form must be completed to claim additional employer support payments under the CDF Capability Approval for specified medical, dental, nursing and allied health officers. This claim form should only be used when you have undertaken specified forms of Defence service.

For all other claims, you should use ESP claim form AD138-2 available on the Reserves website (see [www.defence.gov.au/reserves](http://www.defence.gov.au/reserves)).

**Please do not submit these instructions with the claim form.**

#### Dates of Defence service

This form has been designed for claims that relate to Defence service undertaken on or after 01 January 2009.

This form may also be used to claim earlier Defence service. However, claimants should note that some differences in eligibility apply to claims for service before 01 January 2009.

#### Assistance

If you have difficulty understanding how to complete this form, assistance is available on the ESP Help-line on 1800 001 696 or by emailing [esp@defence.gov.au](mailto:esp@defence.gov.au).

#### Are you self-employed

To be eligible to claim ESP as a self-employed member, you must be:

- conducting a recognised business as a sole trader; or
- conducting a recognised business as a partner, or
- employed in an active role by a company or trust which you control, or
- a director of a company which you control (and play an active role in the direction of), or
- providing services, as an independent contractor, to a company which you control.

You control a company if you and your associates (which includes your spouse and other relatives) are, between you, able to control more than 50% of the voting power in the company, or receive more than 50% of the dividends or have the right to more than 50% of any distribution of the capital of the company.

#### Are you self-employed on a full-time basis

To be eligible to claim ESP on the basis of full-time self-employment, you must be in regular paid self-employment for 35 hours or more each week (or for the number of hours specified in a workplace agreement, award or certified agreement as full-time hours each week for that work).

#### Who can claim

You can claim additional employer support payments under the CDF Approval if you belong to one of the following categories of medical, dental, nursing and allied health officers:

- Anaesthetist
- Burn or plastic surgeon
- Dental sedationist
- Dentist
- Dermatologist
- Ear, nose and throat specialist
- Emergency medicine specialist
- Environmental health officer
- Faciomaxillary surgeon
- Forensic anthropologist
- Forensic archaeologist
- Forensic odontologist
- General physician
- General practitioner
- General surgeon
- Intensivist
- Neurosurgeon
- Obstetrician and Gynaecologist
- Occupational medicine specialist
- Ophthalmologist
- Orthopaedic surgeon
- Paediatrician
- Pharmacist
- Radiographer
- Physiotherapist
- Psychiatrist
- Radiologist
- Scientific officer
- Psychologist
- Registrar
- Sports medicine physician
- Public health physician
- Tropical medicine specialist

## STAFF-IN-CONFIDENCE (After first entry)

### Nursing categories

- Accident and Emergency nurse
- Intensive care nurse
- Midwife
- Perioperative nurse
- Aeromedical evacuation nurse
- Mental health nurse
- Paediatric nurse
- Registered general nurse

This listing is accurate as at 1 January 2009. To confirm updated listings, the current CDF Approval should be checked. A copy is available on the Reserves website (see [www.defence.gov.au/reserves](http://www.defence.gov.au/reserves)).

If you belong to more than one of these categories, you must nominate the category that is your predominant civilian occupation.

Health specialisations not listed may be considered for eligibility of higher level payments, if agreed by Head Reserve and Employer Support Division (HRES D) and either Commander Joint Health (CJHLTH) or Surgeon General Defence Health Reserves (SGDHR).

### Eligible Employment

Additional employer support payments are payable to Reservists who are self-employed on a full-time basis.

Additional employer support payments are payable to Reservists who are self-employed on a part-time basis even if the Reservist is also in full-time employment (*this is different from other ESP claims*).

Additional employer support payments may be payable to Reservists who are self-employed on a casual basis, as long as their self-employment is on a regular or reliable basis.

For further information, see [www.defence.gov.au/reserves](http://www.defence.gov.au/reserves).

### Eligible service

To be eligible for additional employer support payments, you must have undertaken one or more of the following forms of Defence service as a medical, dental, nursing or allied health officer:

- service on an ADF operation;
- service undertaking pre-deployment training for an ADF operation;
- service on a:
  - training exercise;
  - training course (either as a student, instructor or officer conducting the course) or;
  - other training opportunity (including attendance at a medical fellowship) that has been approved by CJHLTH or SGDHR (whether the exercise, course or training opportunity is an ADF event or a foreign or combined event with ADF participation);
- service on a naval ship deployment (*whether an RAN or foreign ship*); or
- service providing civil aid, humanitarian assistance, disaster relief, assistance in a medical or civil emergency or provision of other medical support or other duty for which the officer's service has been authorised by CJHLTH or SGDHR.

### Eligibility criteria

Self employed Reservists will be eligible for ESP payments when they have met all of the following criteria:

#### Qualifying Period

- The Reservist, while self employed, has completed an annual qualifying period of 2 weeks of continuous Defence service prior to the period(s) of Defence service covered by this claim (*or the Defence service covered by this claim includes the 2 weeks of qualifying period service*).
- The qualifying period can be undertaken as a single period or multiple periods of continuous Defence service of 5 days or more.
- Under the CDF Approval, once the qualifying period has been completed, ESP is payable from Day 1 of the eligible service (*this is different to other ESP payments*).
- In certain circumstances, payments may be made under the CDF Approval even when the qualifying period has not been completed. For further details, contact the ESP Help-line on 1800 001 696.

#### Eligible service

- Each period of Defence service is at least 5 consecutive days in duration. (*Note: There are special provisions for Public Holidays, authorised stand-down days, and travel or rest days*).
- Each period of Defence service is considered discretely. The Director of the ESP Scheme is entitled to reassess evidence accepted for an earlier claim and make a different decision relating to the approval of the current claim.
- Service utilising annual leave, long service leave or other forms of accrued leave is not eligible for ESP payments or as qualifying period service.

#### Release for Defence service

- The Reservist has been released to undertake the Defence service and has not undertaken duties for the business or company while on the Defence service being claimed (*except in emergency situations or with prior written permission from the Reservist's Commanding Officer or Branch Head*).

## STAFF-IN-CONFIDENCE (After first entry)

<b>How to submit</b>	<p>This claim form should be submitted to the Director ESP Scheme, R8-G-026, Russell Offices, CANBERRA ACT 2600.</p> <p>Please note claims for standard ESP payments submitted on claim form AD138-2 - <i>ADF Reserves Employer Support Payment Scheme - Claim Form for Self Employed Reservists</i> should be submitted to the ESP delegates as detailed in the instructions with that claim form.</p>
<b>When to claim</b>	<p>Claims should be made within 6 months from the first day of Defence service for which the claim is made.</p> <p>Claims made later than 6 months will only be eligible for payment for periods of service within 6 months of the claim being made (unless this requirement is waived by the Director of the ESP Scheme).</p> <p>If you wish to seek a waiver of the 6 month limitation period, you should indicate this in a covering letter and provide justification for the late submission.</p>
<b>Rates of payment</b>	<p>Rates for additional employer support payments vary by employment category. Current rates are detailed in the CDF Approval - a copy is available on the Reserves website (<a href="http://www.defence.gov.au/reserves">www.defence.gov.au/reserves</a>).</p>
<b>Substantial financial hardship</b>	<p>In exceptional circumstances, where substantial financial hardship has occurred as a result of the Reservist's absence, a Reservist may apply for payment at a higher level (see <a href="http://www.defence.gov.au/reserves">www.defence.gov.au/reserves</a> for more information on the Hardship provisions).</p> <p>These claims must be forwarded to the Director of the ESP Scheme for adjudication.</p>
<b>Injury or illness</b>	<p>Special provisions apply if you suffer an injury or illness as a result of your Defence service (see <a href="http://www.defence.gov.au/reserves">www.defence.gov.au/reserves</a> for more information on these provisions).</p>
<b>Taxation</b>	<p>Payments under the Scheme are taxable income under the <i>Income Tax Assessment Act</i>. Payments are made to the member, for the benefit of the business, and should be declared in the appropriate business tax return.</p>
<b>Important Notice</b>	<p><b>It is an offence to make a false statement to obtain a financial benefit.</b></p>
<b>How to complete the claim form</b>	<p>Different evidentiary requirements apply depending on whether you have a bona fide functioning civil medical practice.</p> <p>These requirements impact on how you complete the claim form and what supporting evidence must be provided.</p>

### If you have, or are contracted to, a bona fide functioning medical practice

<b>Filling in the claim form</b>	<p>You must complete Sections A, B, D and E of the claim form.</p>
<b>Documentation requirement</b>	<p>No supporting documentation is required.</p> <p>CJHLTH or SGDHR will certify certain aspects of your eligibility on an annual basis - this will be actioned by the Director of the ESP Scheme on receipt of your claim form (<i>you do not need to take any action</i>).</p> <p>It will assist the speedy processing of your claim if you are able to provide copies of Defence documentation relating to your Defence service (<i>eg. training notice, signal approving full-time Defence service, course joining instruction or similar</i>). However, if you are unable to provide these, ESP staff will confirm the nature of your service through Defence channels.</p> <p>It will also assist speedy processing of the claim if you provide evidence of your normal work hours in the practice (<i>for part-time employment this evidence should, if possible cover the two month period prior to the Defence service</i>).</p>
<b>Civil Practice Support Allowance</b>	<p>If a claimant is entitled to Civil Practice Support Allowance, this entitlement is offset from any additional ESP payment under the CDF Approval.</p>

### If you do not have, or are not contracted to, a bona fide functioning medical practice

<b>Filling in the claim form</b>	<p>You must complete Sections A, C, D and E of the claim form.</p>
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## STAFF-IN-CONFIDENCE *(After first entry)*

<b>Documentation requirement - Initial Claim</b>	<p>Your 1st claim form must be accompanied by the following supporting documents, which must relate to the period immediately prior to the Defence service being claimed:</p> <ul style="list-style-type: none"><li>• Evidence that your business or company is bona fide.</li><li>• Evidence that your business or company is trading or operating.</li><li>• Evidence that your business or company provides your principal source of income and has done so for a continuous period of at least the previous six months.</li><li>• Evidence of normal work hours <i>(for part-time employment, this should, whenever possible, cover a two month period)</i>.</li></ul> <p>Acceptable forms of evidence are detailed in Section C of the claim form.</p> <p>Evidence must be provided in an acceptable form and must also provide proof of the relevant requirement. There are two requirements - the correct form and the substance of the information contained in the document.</p> <p>Principal source of income documentation must relate to a specified period of at least six months in length.</p> <p>When there is a gap of more than three months between the information and the Defence service, the Director of the ESP Scheme may request more up-to-date information be provided.</p>
<b>Documentation relating to Defence service</b>	<p>While not mandatory, it will assist the speedy processing of your ESP claim if you are also able to provide copies of Defence documentation relating to each period of your Defence service <i>(eg. training notice, signal approving full-time Defence service, course joining instruction or similar)</i>. However, if you are unable to provide this, ESP staff will confirm the nature of your service through Defence channels.</p>
<b>Documentation requirement - Further Claims</b>	<p>You may rely on documentation for up to three years:</p> <ul style="list-style-type: none"><li>• If a claimed period of Defence service is within six months of a previous period of continuous Defence service <i>(for which an ESP payment was received or which was counted towards the annual qualifying period)</i> - you can rely for up to three years on the supporting documents that were previously provided.</li><li>• However, if there has been a gap of six months or longer between periods of continuous Defence service <i>(ie periods that are at least 5 consecutive days in duration)</i> - new supporting documents are required with the subsequent claim for Defence service.</li></ul> <p>If relying on previously provided supporting documents, there is no requirement to resubmit these supporting documents, unless requested to do so by the Director of the ESP Scheme.</p> <p>However, each period of Defence service is considered discretely. So, the Director of the ESP Scheme is entitled to reassess evidence accepted for an earlier claim and may make a different decision relating to acceptance of the evidence and approval of the current claim.</p> <p>You may choose to provide new supporting documents with any claim, even if within the three year period detailed above. If the new evidence is accepted by the Director of the ESP Scheme, a new three year period would apply.</p>
<b>Re-establishing eligibility</b>	<p>If you have relied on previously provided supporting documents, you must submit new supporting documents to re-establish your eligibility after three years. The three year period for the use of documentation runs from the end of the specified assessment period that the information covers.</p> <p>These new documents must relate to a new period immediately <b>prior to</b> the Defence service being claimed now. They must cover the same requirements as previously:</p> <ul style="list-style-type: none"><li>• Evidence that your business or company is bona fide.</li><li>• Evidence that your business or company is trading or operating.</li><li>• Evidence that your business or company provides your principal source of income and has done so for a continuous period of at least the previous six months.</li><li>• Evidence of normal work hours <i>(for part-time employment, this should, whenever possible, cover a two month period)</i>.</li></ul>
<b>Consideration of ESP payments</b>	<p>When you submit new supporting documents to re-establish your eligibility, the principal source of income assessment period may include ESP payments that you have received from previous ESP claims.</p> <p>ESP payments cannot be used to meet principal source of income requirements. If payments of ESP have been made to the member's business or company over the assessment period, then the amount of the payments is subtracted from the member's income from the business. This reduction of the amount of the member's income from the business by the amount of the ESP payments may be varied or eliminated by the Director of the ESP Scheme in some circumstances (see <a href="http://www.defence.gov.au/reserves">www.defence.gov.au/reserves</a> for more information).</p>
<b>Legitimate Business Test</b>	<p>In exceptional circumstances, where it would be unfair to apply the principal source of income requirement, a Reservist may apply for consideration under the Legitimate Business Test (see <a href="http://www.defence.gov.au/reserves">www.defence.gov.au/reserves</a> for further information on the Legitimate Business Test provisions). These claims must be forwarded to the Director of the ESP Scheme for adjudication.</p>

STAFF-IN-CONFIDENCE *(After first entry)*

## STAFF-IN-CONFIDENCE *(After first entry)*

### Guidance on Sections

#### Section A

You must complete all areas in this section. Tick appropriate boxes.

You may only claim for periods of Defence service when you have undertaken specified types of Defence service as detailed on page 2 (*in the 'Eligible service' box*). For other types of Defence service (not included on page 2) which may be eligible for standard ESP payments, you should use ESP claim form AD138-2.

If this is your first claim of the financial year, you should include all eligible periods of Defence service (*when you were released to undertake the Defence service and you were not utilising annual leave, long service leave or other forms of accrued leave*), including those periods that will meet the qualifying period requirement.

Each period of service must be shown separately (*eg service from 12 - 16 Aug, 19 - 23 Aug and 2 - 6 Sep must be shown in three separate blocks; not as 12 Aug - 6 Sep*).

Only days of service on which you worked a full day can be counted (*unless the part day was used for approved travel or rest purposes or you were on authorised stand-down on that day*).

If a period of service is less than five consecutive days, it is not eligible for payment of ESP (*unless linked with a Public Holiday, an authorised stand-down day or a part day used for approved travel or rest purposes*).

If you are self employed on a part-time basis, you will be eligible for payment of additional ESP under the CDF Approval on a pro rata basis.

#### Section B

**If you have, or contract to, a bona fide functioning medical practice, you must complete all areas in this section.**

No supporting documentation is required but if your employment in your practice is on a part-time basis (ie less than 35 hours per week) it will assist speedy processing of the claim if you provide evidence of your normal work hours in the practice, with your claim form (this evidence should, if possible, cover a two month period prior to the Defence service).

#### Section C

**If you do not have, or are not contracted to, a bona fide functioning medical practice, you must complete all areas in this section.**

This documentation **MUST** be provided with the first ESP claim that you submit. The documentation must relate to the period immediately prior to the Defence service being claimed.

The documentation **MUST** also be provided when your entitlement must be re-established - after any break of 6 months or longer between periods of continuous Defence service or after 3 years (*whichever comes first*).

If you have not had a break of 6 months or longer between periods of continuous Defence service - you can rely for up to 3 years on the supporting documents that were previously provided.

You may choose to provide new supporting documents with any claim, even if within the 3 year period detailed above.

Tick appropriate boxes to show which evidence is attached.

#### Section D

This information is needed to allow Direct Credit payment of the ESP.

#### Section E

You must sign this Declaration. **Please ensure that you read and understand each of the elements of the Declaration.** You are required to confirm, acknowledge or declare a number of important points.

You must advise the Director of the ESP Scheme if, while you are receiving payments of ESP, you:

- cease CFTS earlier than the dates on the claim form; or
- dispose of your business or cease to trade/operate in your business on a permanent basis; or
- cease to be a partner in the partnership; or
- cease to have controlling interest in the business.

**STAFF-IN-CONFIDENCE (After first entry)**

Department of Defence

Date received

**ADF Reserves  
Employer Support Payment Scheme**

***CDF Approval for Additional Employer Support Payments for  
Medical, Dental, Nursing or Allied Health Officers***

***Claim form for Self Employed Reservists***

**Privacy statement**

Defence is collecting the information on this form to determine your eligibility for payment under the ADF Reserves Employer Support Payment Scheme. This payment is authorised by Defence (Employer Support Payments) Determination 2005 made under Section 58B of the *Defence Act 1903*.

Information provided in this Employer Support Payment claim form is safeguarded by the *Privacy Act 1988 (Cth)*. This prevents the information contained in this form from being used for purposes other than administration of the Employer Support Payment Scheme. This information may be used in the organisation or conduct of employer support activities.

**Completion instructions:** Refer to pages 1 to 5 for instructions. Reservists must tick or complete all appropriate boxes in Sections A to E (as directed). When completed, please submit pages 6 to 10.

**Section A - To be completed by the Reservist**

**Claimant's details**

Rank	Service number	PMKeyS number	Family name	Initials
Unit		Mailing address for correspondence ( <i>Business mailing address may be provided</i> )		
Phone number	Fax number	Email		

**Claimant's organisation or business**

Name of organisation or business		Activity of organisation and/or business	
ABN		Date business commenced	
Contact name		Position	
Contact's phone number	Contact's fax number	Contact's email	
Business mailing address ( <i>If different to mailing address above</i> )			
Business physical address ( <i>If different to Mailing Address - required for ROMAN vendor details</i> )			

**Claimant's health employment category or specialisation** (*This must be one of the categories listed on page 1 or 2*)

Health employment category or specialisation
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## STAFF-IN-CONFIDENCE *(After first entry)*

### Nature of employment *(Tick appropriate box)*

- I am conducting a recognised business as a sole trader.
- I am conducting a recognised business as a partner.
- I am employed in an active role by a company or trust which I control.
- I am the director of a company which I control *(and play an active role in the direction of the company)*.
- I am providing services, as an independent contractor, to a company which I control.

### Claimant's periods of Defence service

Periods of Defence service to which this claim relates *(if this is your first claim for the financial year, you should include the service that will meet the qualifying period requirement)*.

Date from	Date to	Type of Defence service - this must be one or more of the types listed on page 2 (eg. "Deployment on OP..." or Ship deployment with HMAS..." or "Completed...course" etc) To claim for other types of Defence service (not listed on page 2), you must use claim form AD138-2.

You should not claim ESP for any part of a period of Defence service when you were on annual leave, LSL or other forms of accrued leave from your business.

If any of the periods of Defence service commenced more than 6 months prior to the submission of the claim form, you will need to seek a late waiver if you wish this service to be considered. Justification for the late submission is required.

### Section B - To be completed if you have, or contract to, a bona fide functioning medical practice

*(If you do not have, or contract to, a bona fide functioning medical practice, go to Section C)*

A bona fide functioning civil medical practice is a properly established medical practice in which a registered medical practitioner or practitioners clinically attend to patients on a part-time or full-time basis

*(Tick appropriate boxes)*

I have a bona fide functioning civil medical practice.

I work in my practice for  hours per week.

The basis of my self-employment in my practice is: *(Tick appropriate box)*

Full time *(This must involve 35 hours or more work per week)*     Part time

I am entitled to claim Civil Practice Support Allowance in respect of any of the claimed periods of Defence service detailed above

Yes     No

If not entitled to Civil Practice Support Allowance for all periods of service, specify for which you are entitled

No supporting documentation is required. However, it will assist speedy processing of your claim if you are able to provide copies of Defence documentation relating to your Defence service *(eg. Training notice, signal approving full-time Defence service, course joining instruction or similar)* and, evidence of your normal work hours in the practice.

**Please go to Section D.**

## STAFF-IN-CONFIDENCE (After first entry)

### Section C - To be completed if you do not have, or are not contracted to, a bona fide functioning medical practice

#### Full-time or Part-time

The basis of my self-employment is:

Full-time (*this must involve 35 hours or more per week*)     Part-time for  average hours per week.

If in part-time self-employment, payment is made on a pro-rata basis.

Evidence of **normal work hours** (*required for all claimants completing Section C*)

Evidence provided (*eg payslips including hours worked, employment contract or similar evidence. For part-time employees last two months rosters, last two months payment details including hours worked, or other similar evidence*).

It will assist speedy processing of your claim if you are able to provide copies of Defence documentation relating to your Defence service (*eg. Training notice, signal approving full-time Defence service, course joining instruction or similar*).

Have you been unemployed or applied for unemployment within the last 12 months?

No     Yes dates   
(If "Yes", provide dates and details, and any documentation you may have from Centrelink)

#### Supporting evidence

The following documentation must be provided with the claimant's first ESP claim or after any gap of six months or longer between periods of continuous Defence service or after three years from the Principal Source of Income assessment period (*whichever comes sooner*).

The documentation must relate to a six month or longer period immediately prior to the Defence service being claimed. Evidence cannot be accepted that relates to a period after the claimed service.

*For example - if a member undertakes service in Aug 2009, suitable evidence would include the Apr - Jun 2009 Business Activity Statement or 2009 Company tax return (which covers FY 2008/09) and the 2009 Individual tax return with ATO notice of assessment.*

If you are within three years from the Principal Source of Income assessment period and have not had a gap of six months or longer between periods of continuous Defence Service, you may rely on documents provided with previous ESP claims (*see Instructions for Completion for further explanation*).

You may also claim under the Legitimate Business Test provisions of the CDF Approval. Different documentation requirements apply.

**Complete either sub section (C-1) or sub section (C-2) or sub section (C-3) (One sub section only)**

#### (C-1) Principal Source of Income documentation

I have enclosed copies of the following documentation (*See below - note that you must supply at least one from each of the sections below*):

Proof that the business or company is **bona fide** (*Attach one or more, as necessary*)

Notification of Australian Business Number registration from the Australian Taxation Office

Certificate of Incorporation

Business registration certificate

Proof that the business or company is **trading or operating** (*Attach one or more, as necessary*)

Current Business Activity Statement for the business or company

Current financial statement for the business or company, certified by the company's financial adviser or accountant

Current business tax return with the Australian Taxation Office notice of assessment (*If not yet received, the notice of assessment must be forwarded within 7 days of its receipt*)

Other evidence from a financial adviser or accountant for the business or company

Proof that the business or company has provided the Reservist's **principal source of income for a continuous period of at least the previous six months** (*Attach one or more, as necessary*).

Reservist's current financial statement, certified by the member's financial adviser or accountant

Reservist's current personal tax return with the Australian Taxation Office notice of assessment (*If not yet received, the notice of assessment must be forwarded within 7 days of its receipt*)

Other evidence from a financial adviser or accountant concerning the Reservist's income.

#### (C-2) Previous Principal Source of Income documentation

I wish to rely on documentation, relating to a principal source of income assessment period of six months or longer

from  Date    to  Date    which was provided with an earlier claim.

## STAFF-IN-CONFIDENCE (After first entry)

### Section C- To be completed if you do not have, or are not contracted to, a bona fide functioning medical practice (Continued)

#### (C-3) Legitimate Business Test documentation

I wish to claim under the Legitimate Business Test provisions, relying on a Legitimate Business Test assessment

period of six months or longer from  to

Different documentation requirements apply to Legitimate Business Test claims - refer to Defence Reserves website at [www.defence.gov.au/reserves](http://www.defence.gov.au/reserves) for details.

I have enclosed Legitimate Business Test documentation with this claim  
or

I wish to rely on Legitimate Business Test documentation which was provided with an earlier claim.

### Section D - To be completed by the Reservist

#### Business account details

Account name		Bank name	
Branch	BSB number	Account number	

(To be completed by bank signatories or company human resource manager)

I hereby authorise the Department of Defence to record and use the details provided for the purpose of Direct Credit payment of the ESP.

Signature	Printed name	Date
Signature	Printed name	Date

### Section E - Self Employed Reservist declaration (To be completed by the Reservist)

- I confirm that I have attached any required elements of evidence (Unless I am relying on evidence previously submitted).
- I confirm that I was not utilising annual leave, long service leave or other forms of accrued leave whilst on the periods of Defence service detailed on this claim form.
- I confirm that I did not/will not engage in any activities related to my civilian employment whilst on the periods of Defence service detailed on this claim form, except in emergency situations or with prior written authorisation from my unit commander or branch head.
- I acknowledge that I must advise the Director of the ESP Scheme if any of the following events occur while I am receiving ESP payments for a continuing period of eligible service:
  - if my period of CFTS ceases earlier than the dates claimed on this claim form, or
  - if I dispose of my business, or
  - if I cease to be contracted to a bona fide functioning medical practice, or
  - if I cease to trade/operate in my business on a permanent basis, or
  - if I cease to be a partner in the partnership, or
  - if I cease to have a controlling interest in my company or business.

In this event, my entitlement to ESP payments will cease immediately the event occurs

- I acknowledge that I may make a claim in writing for additional payment if I can justify that the absence on Defence service causes substantial financial hardship or substantial financial loss. I acknowledge that I must make such a claim as soon as reasonably possible after becoming aware of the circumstances giving rise to this hardship or loss.
- I declare that all the information that I have given in this form is true and correct.
- I acknowledge that should I give misleading or false information in respect to this claim, penalties may apply.
- I declare that I have not submitted a previous claim for the periods of Defence service detailed in this claim.
- I have read and understood each of the elements of this Declaration.

Signature	Printed name	Date
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## STAFF-IN-CONFIDENCE *(After first entry)*

### Section F - Official use only - To be completed by Director ESP scheme

<b>Claimant's details</b>							
Service number	PMKeyS number	Rank	Family name	Initials			
<b>Qualifying period service</b>							
The 2 week annual qualifying period service should be recorded from the first claim form submitted in each financial year.							
<b>Qualifying period calculations</b>							
Financial Year	Date from	Date to	Number of days	Number of weeks qualifying service <i>(Must total two weeks)</i>			
<b>Civil Practice Support Allowance (CPSA)</b>							
If the claimant is entitled to CPSA, this is offset from any ESP payment under the CDF approval.							
<b>Eligible service for ESP payments</b>							
All eligible service on this claim form should be detailed here <i>(including qualifying period service once completed)</i> .							
<b>ESP calculations</b>							
Date from	Date to	Number of days	Number of weeks payment	CPSA entitlement	Part-time hours <i>(If applicable)</i>	Weekly rate for category	Amount payable
<b>Total amount payable</b>							
<b>Certification by Director ESP Scheme</b>							
I have reviewed the documentation provided to support this claim and have conducted appropriate checks so as to satisfy myself that:							
<input type="checkbox"/> The applicant is self employed							
<input type="checkbox"/> on a Full-time basis <input type="checkbox"/> on a Part-time basis ( <input style="width: 50px;" type="text"/> hours per week)							
<input type="checkbox"/> If employed on a part-time basis, payment has been calculated on the correct pro rata basis							
<input type="checkbox"/> The applicant has, or is contracted to, a bona fide functioning medical practice.							
or							
<input type="checkbox"/> The applicant has a bona fide business or company.							
<input type="checkbox"/> The business or company is trading or operating.							
<input type="checkbox"/> The business or company has provided the applicant's principal source of income <i>(Or met Legitimate Business Test requirements)</i> for a continuous period of six months or longer from <input style="width: 100px;" type="text"/> Date to <input style="width: 100px;" type="text"/> Date							
<input type="checkbox"/> I approve this claim for ESP as detailed above <input type="checkbox"/> I do not approve this claim for ESP							
Comments							
Signature				Printed name			
Rank		Appointment		Phone number		Date	