

Child Trust Fund

You must give details of each child by using this form. Please write in capital letters and use black ink. For more information, go to www.gov.uk/government/ collections/child-trust-fund-for-local-authorities	Local authority unique identifer CTF15 (child) number
Child details	
1 Surname 2 First name(s)	Does an appropriate person have parental responsibility? No Yes 11 If this child has used a different name to the one given at questions 1 and 2 give the details here
3 Is this child male or female? Male Female 4 Childs date of birth DD MM YYYY	Surname First name(s)
5 Childs Unique Reference Number, if known 6 Have you any information that suggests this child is subject to immigration control?	12 Has the child died? No Yes If yes, tell us the date below DD MM YYYY Then go to question 14, on page 2 and give the contact
No Yes If Yes, tell us about this in the more information section on page 2	details of the personal representive Birth parent's details (usually the mother) Title, for example, Mr, Mrs, Miss, Ms or other title
7 Date child was first looked after by this authority DD MM YYYY	Surname First name(s)
8 Was the child looked after on their seventh birthday? Only fill in this question if the child was born before 1 August 2003 No Yes	Address
9 Is this the first time you have reported this child?	Postcode

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Child detail's continued	More information
We will write to this person unless you put a tick here to tell us not to write to them Title for example, Mr, Mrs, Miss, Ms or other title Surname First names	If you need to give us more information, tell us about this in the space below
Address	
Postcode	

Your rights and obligations
Your Charter explains what you can expect from us and what we expect from you.

For more information, go to www.gov.uk/government/publications/your-charter