

## INFORMATION SHEET

### **Important advice for claiming benefits under Book Two of the German Social Code (SGB II)**

This advice is intended to inform you about regulations to be observed and your most important obligations in connection with basic security benefits for job-seekers as laid down in Book Two of the German Social Code if you claim or receive unemployment benefit II or social assistance (*Arbeitslosengeld II / Sozialgeld*).

#### **I. Important advice and information on your obligations if you receive basic security benefits for job-seekers in accordance with the provisions of Book Two of the German Social Code (SGB II)**

##### **Active cooperation**

Basic security benefits for job-seekers are granted provided you, the employable person entitled to benefits, and all relatives living in the "community of dependence" (*Bedarfsgemeinschaft*) (spouse, partner, children under 25 or parent(s) of employable persons entitled to benefits under 25), have fully exhausted all other possibilities of ending or reducing your need for assistance. Since unemployment benefit II and social assistance are secondary benefits, you must, if applicable, claim and pursue other prior-ranking entitlements promptly (e.g. other social benefits such as unemployment benefit I, pension, child allowance, maintenance payments / advances on maintenance payments and compensation claims).

##### **Filing the application (first and follow-up application)**

You must apply for basic security benefits for job-seekers as well as for benefits for training and participation measures. The application is valid retrospectively from the first of the month in which the application was filed and will be considered from this date. Benefits for periods before this cannot be granted. In order to avoid any delays in the processing, we recommend that you file the application about 4 weeks before you need the benefits. The application does not have to be made in any particular form. You can send it by post or make it in person. However, you must submit all the necessary forms and documents afterwards (Sect. 60 (2) SGB I).

Please note: If you send a follow-up application late, it is only valid retrospectively from the first of the month. For any periods before this, payment of benefits as well as health insurance and long-term care insurance will be interrupted. This means that you and your family possibly do not have any health insurance and long-term care insurance during this period.

NB: Basic security benefits for job-seekers as well as benefits for training and participation measures are only granted for a temporary period (usually 6 months). If necessary, you must file a follow-up application for both benefits in good time (at least two weeks) before the period of entitlement expires.

##### **Obligations to cooperate and notify**

Your cooperation is required so that we can check and assess your entitlements to benefits. Pursuant to Sect. 60 SGB I you are obliged to help us to assess whether you are eligible for benefits and to specify all facts that are of relevance to the benefits and which are requested in the application form. We may refuse or withdraw all or part of any benefits provided to secure your livelihood if you do not cooperate (Sect. 66 SGB I). If information is required from third parties, you must consent to these persons giving the information. If any verification is required (certificates, documentary proof), you must specify these or submit them yourself.

During the period in which you claim basic security benefits for job-seekers, you are obliged to report personally if necessary, when requested, and possibly to undergo a medical or psychological examination.

Furthermore you are obliged **to inform us immediately and without being asked of any later changes** to the facts provided by you. Only then can we ensure that the correct amount is paid and excess payments are avoided. This also applies if there are any changes that may subsequently affect your claim for benefits, e.g. an application for or granting of a pension.

***These obligations to cooperate and notify do not only apply to you but also to all other relatives and persons living in your community of dependence!***

##### **You must inform us immediately in particular if**

- You or a member of your community of dependence starts work - including self-employment or helping a family member. Do not rely on other people to notify us that you have started work. This responsibility lies with you alone!
- You or a member of your community of dependence takes on temporary or marginal employment (so-called "mini job") or earn money from a voluntary activity.

- You or a member of your community of dependence receives one-off income such as tax rebates, a lottery prize, inheritance, outstanding claims, loans, home-owner subsidies, full or partial costs of board from employer. Payments in kind (meals and accommodation) also count as income.
- You or a member of your community of dependence receives income from rent or lease of property.
- You or a member of your community of dependence receives revenue from assets (e.g. interest, dividends, life assurance policy payouts).
- You as the employable person entitled to benefits or an employable person entitled to benefits who lives in the community of dependence is unable to work due to sickness and also when capacity for work is restored. You must submit a medical certificate from a doctor confirming the incapacity for work and its expected duration.
- You or a member of your community of dependence applies for or receive maternity benefits, child benefit or similar benefits.
- You or a member of your community of dependence is pregnant.
- You or a member of your community of dependence applies for or draws pensions of any kind, especially a pension for reduced earning capacity or retirement pension (including pensions from abroad).
- You or a member of your community of dependence applies for the payment of other social welfare benefits or have applied for these in the past (e.g. pensions, unemployment benefit I, sick pay, housing benefit, advance maintenance payment, parental allowance, vocational training grants, student grants etc.).
- You or a member of your community of dependence appeals or has appealed against decisions of other social services providers (objection, lawsuit, appeal).
- Your address has changed. Please note that before you sign a contract for new accommodation, you must first obtain a declaration of consent from the social services provider for the new rent. Failure to obtain this declaration may mean that the deposit or costs of the accommodation /rent (or part thereof) may be refused. Please contact us in good time before you plan to move.
- Your rent is changed.
- Another or several new members move into your community of dependence.
- A person leaves your household or your community of dependence - even if only temporarily - or you or another member of your household wishes to stay somewhere outside the restricted local area laid down in the directive on reachability (EAO). Pursuant to SGB II a person is permitted to be absent from their usual residence for a maximum of 21 days per calendar year. You must apply for permission from your employment coach in good time prior to the start of absence. If you are absent for longer than 21 days or do not report your absence, benefits will be discontinued. Please note that you are not entitled to unemployment benefit II if you, your partner or children reside outside the restricted local area without the consent of your personal contact partner and that you have no health insurance or long-term care insurance protection during this time!
- You or a member of your community of dependence is admitted to a stationary institution (including temporary stays), (e.g. hospital - for an expected period of longer than 6 months, rehabilitation hospital, mother and child facility or other institution, e.g. youth welfare institution of institution for persons with special social difficulties). Imprisonment - including remand detention - is considered as equivalent to such a stay.
- You or a member of your community of dependence gets married or enters into a civil partnership, permanently separates from the spouse or civil partner or terminates the marriage or civil partnership
- Your residence title or the residence title of another person in the community of dependence changes or is withdrawn.
- Your income or assets or the income or assets of a person in your household change.
- You or a person in your household starts a university course or training course.
- You have received a yearly statement of heating or operating costs from your landlord or energy supplier. This also applies if the yearly statement shows a credit balance in your favour.

Please inform us of any changes immediately and make sure that the information you provide is complete and accurate. It is in your interests to comply with these obligations to cooperate. If you make incomplete or false statements, or do not notify us of any changes immediately or not at all, it is possible that not only will you have to repay any benefits unlawfully received, but you may also be guilty of an administrative offence or crime.

Benefit fraud is detected using modern electronic data processing methods and is resolutely pursued, sometimes in cooperation with other public bodies and service providers.

**Anyone who conceals existing income or assets and then claims or receives an unjustified amount of social welfare benefits will be reported to the public prosecutor in each known case on suspicion of fraud (abuse of the social welfare system).**

Fraud or attempted fraud is punishable with imprisonment of up to five years or a fine in accordance with Sect. 263 of the German Criminal Code (StGB). You may also face criminal prosecution on grounds of fraud if you give inaccurate or incomplete information. For anyone who requires a residence permit, the outcome of the criminal proceedings may have a negative impact on their residence status.

## II. Explanations on the scope of benefits

Benefits provided to secure your livelihood are calculated on the basis of standard needs which are defined by law. If you have an income of your own, this income will be topped up to the level required to meet standard needs.

**The following costs must be paid from the total of regular benefits provided to secure your livelihood and your own income:**

- Rent (including heating if necessary)
- Food
- Domestic electricity (for cooking and lighting, operation of electrical equipment)
- Personal hygiene
- Cleaning
- Personal daily requirements
- Additional payments for medical services and any fees for seeing the doctor
- Additional requirements for clothing, laundry, household goods, furniture, household appliances
- Expenses for special family occasions

The following benefits may also be granted or taken into consideration at a later date:

- Domestic fuel allowance (*for individual heating systems unless monthly prepayments are paid by the social service provider*)
- Supplementary payments arising from the annual statement of heating and ancillary costs

**You may receive additional benefits for the following if required:**

- Maternity clothing and starter clothes and equipment for a new baby
- First set of clothes, furniture and household appliances (*if no basic equipment exists*)
- Purchase and repair of orthopaedic shoes, repairs of therapeutic appliances and equipment and rent of therapeutic appliances
- Expenses for external hot water supply (via boiler)

**Please note that, with the exception of personal school supplies, the following benefits for training and participation in social life in accordance with Sect. 28 SGB II must be applied for separately:**

- School excursions and class trips lasting more than one day within the framework of educational regulations
- Costs of school transport
- Reasonable supplementary learning support provided this is additional and appropriate
- Communal lunch in the school or day care centre
- Participation in social and cultural life of the community (e.g. membership fees for clubs, art classes or holiday courses/camps)

School supplies will be approved automatically in accordance with the statutory regulations provided you receive regular benefits in accordance with SGB II. If not, an application must be made. If in doubt, contact your benefits administrator or a member of the education and participation department.

If you wish to apply for these benefits, you must file your application in good time before the planned purchase or before the planned event so that we have time to check whether you are entitled to benefits and if so, which.

## III. Special advice on your obligations to utilise your working capacity (*for employable persons eligible for benefits*)

Every employable person eligible for benefits (beneficiary of unemployment benefit II) must do work in order to provide for him/herself and the relatives living in his/her community of dependence. In principle, you can be expected to do any work for which you are physically fit. Every employable person eligible for benefits must primarily look for work him or herself and on demand provide evidence of the efforts made to find a job. You must participate in all reasonable measures offered in order to integrate you into the labour market. This also includes conclusion of an integration agreement. Anyone who cannot find a job will, wherever possible, be offered opportunities to work in the form of additional jobs.

**If you have any questions about benefits and the law** (standard needs, accommodation costs, moves etc.) please contact your **benefits administrator**.

**If you have any questions about finding work**, job applications, qualifications etc., please contact your **employment coach**.

**I/we have read the instructions on legal consequences and understood the consequences in the event of non-compliance and sign below with my/our signature(s):**

\_\_\_\_\_  
(Date, name (please write legibly), signature of the person described as head of the household)

\_\_\_\_\_  
(Date, name (please write legibly), signature of the member of the community of dependence over 18)

\_\_\_\_\_  
(Date, name (please write legibly), signature of the member of the community of dependence over 18)

\_\_\_\_\_  
(Date, name (please write legibly), signature of the member of the community of dependence over 18)

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(Date, name (please write legibly), signature of the member of the community of dependence over 18)

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(Date, name (please write legibly), signature of the member of the community of dependence over 18)

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(Date, name (please write legibly), signature of the member of the community of dependence over 18)