HM Revenue & Customs

You must give us details of each child by using this form.
Please write in capital letters and use black ink. If you need help, please refer to the CTF15 Notes.

Return for monthly period to

0 6 ☐☐ ☐☐☐☐

Local authority unique identifier ☐☐☐☐☐

CTF15(Child) number ☐

Child's details

1 Surname

2 First name(s)

3 Is this child male or female?

Male ☐ Female ☐

4 Child's date of birth *DD MM YYYY*

☐☐ ☐☐ ☐☐☐☐

5 Home Office reference

☐☐☐☐☐☐☐☐☐☐☐☐

6 Date child was first looked after by this authority

☐☐ ☐☐ ☐☐☐☐

7 Was the child looked after on their 7th birthday?
Put 'X' in the 'No' box if child is under age 7

No ☐ If 'No', go to question 9

Yes ☐ If 'Yes', go to question 8

8 Is this the first time you have reported this child?

No ☐ Yes ☐

9 If the child has used a different name to the one given above, enter details here

Surname

First name(s)

10 If this child died during the return period, enter the date of death here. Then go straight to question 14, and enter **contact details of the personal representative.**

☐☐ ☐☐ ☐☐☐☐

11 Birth parent's details (usually the mother)

Title, enter MR, MRS, MISS, MS or other title

Surname

First name(s)

Address

Postcode

12 Does an appropriate person have parental responsibility?

No ☐ If 'No', go to question 13

Yes ☐ If 'Yes', go to question 14 and enter **contact details of the person with parental responsibility**

13 If there is no appropriate person with parental responsibility, tell us which conditions apply.
See CTF15 Notes, page 2. Put 'X' in the appropriate boxes

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6

Go to question 14 and enter **contact details for the child**

14 Contact details
We will write to this person unless you put an 'X' here to tell us not to write to them. ☐

Title, enter MR, MRS, MISS, MS or other title

Surname

First name(s)

Address

Postcode

Additional information *If you need to give us additional information, please put 'X' in the box. Use a separate sheet and include your unique identifier and the CTF15(Child) number.* ☐