**For carers receiving Income Support (including those who are lone parents of children under 5 years old) who have been asked to undertake WRA**

**Note:** Please note this document is an illustrative guide only and is not legal advice.

*Name*

*Address*

*National Insurance Number*

*Dear Madam/Sir (or name if known),*

**Re: Requirement to undertake work related activity**

I am in receipt of Income Support as a carer. *I am also a lone parent of a child under 5 years old (delete as applicable).*

You have asked me to take part in work related activity *(by letter dated the…/ by telephone call on the…)* *to start on the…*

*If you wish you can add some details of what you have been asked to do, ie attend a training course or undertake a work placement.*

I understand that I do not have to take part in any work related activity because I am claiming Income Support primarily as a carer.

Regulation 2 of The Income Support (Work-Related Activity) and Miscellaneous Amendments Regulations 2014 exempt me from these activities. The regulations can be accessed here:

<http://www.legislation.gov.uk/uksi/2014/1097/regulation/2/made>

*Requirement to undertake work-related activity*

*“2(1)  The Secretary of State may require a person who satisfies the conditions in paragraph (2) to undertake work-related activity as a condition of continuing to be entitled to the full amount of income support payable apart from these Regulations.*

*(2)  The conditions referred to in paragraph (1) are that the person—*

1. *is entitled to income support;*
2. *is subject to a requirement imposed under section 2A of the Social Security Administration Act 1992;*
3. *is not a lone parent of a child under the age of 3; and*
4. *falls within paragraph 1(1) of Schedule 1B to the Income Support (General) Regulations 1987 and no other paragraph within that Schedule.”*

*Delete the following as applicable:*

*(For carers who are not also lone parents of children under 5 years old)*

I do not fall within paragraph 1 (lone parents) of Schedule 1B to the Income Support (General) Regulations 1987, and therefore do not meet the conditions in paragraph 2 of regulation 2 of The Income Support (Work-Related Activity) and Miscellaneous Amendments Regulations 2014. I am therefore not required to undertake work related activity.

Schedule 1B of the Income Support (General) Regulations 1987 can be accessed here: <http://www.legislation.gov.uk/uksi/1987/1967/pdfs/uksi_19871967_310515_en.pdf>.

**or**

*(For carers who are also lone parents of children under 5 years old)*

I do fall within paragraph 1 (lone parents) of Schedule 1B to the Income Support (General) Regulations 1987, however I do also fall within another paragraph of that Schedule. The paragraph I also fall within is paragraph 4 of Schedule 1B as *I am in receipt of Carer’s Allowance / I am regularly and substantially engaged in caring for another person who receives the middle or the higher rate of the care component of Disability Living Allowance, the daily living component of Personal Independence Payment, Attendance Allowance or Armed Forces Independence Payment / I am regularly and substantially engaged in caring for another person who is awaiting the outcome of their claim for Disability Living Allowance, Personal Independence Payment, Attendance Allowance or Armed Forces Independence Payment and 26 weeks have not passed since the date of their claim (delete as applicable)*

Therefore, as I do fall within another paragraph of Schedule 1B and therefore do not meet the conditions in paragraph 2 of regulation 2 of The Income Support (Work-Related Activity) and Miscellaneous Amendments Regulations 2014, I am not required to undertake work related activity.

Schedule 1B of the Income Support (General) Regulations 1987 can be accessed here: <http://www.legislation.gov.uk/uksi/1987/1967/pdfs/uksi_19871967_310515_en.pdf>.

As I am fully exempt from the work related activity requirement please be notified *that I will not be taking part / I will be taking part but on a voluntary basis only, and can decide not to take part if I see fit (delete as applicable).*

I further understand that no sanction will be applied to my benefit if I do not take part in this or any subsequent work related activity outside of the regulations.

If you feel this is incorrect I request that you send to me the guidance and regulations that you are acting under. Please send these without delay and before the date of the proposed work related activity has lapsed.

*(You may want to add here any details of the letter/call that you feel are relevant – for example if the adviser implied that your benefits would stop if you didn’t undertake work related activity, or made statements you feel were unnecessary)*

I look forward to your reply.

*Signature Date*

*(You must sign and date this)*