



# Application for 2020/2021 Waiver of Transportation and/or Mandatory Instruction Fees

*Please read instructions before completing this application.*

**SECTION A: (Please print) MUST BE COMPLETED FOR ALL REQUESTS**

Applicant Parent(s)/ Guardian (s) or Independent Student		Last Name	First Name
Street Address		City	Province
		Postal Code	
Home Telephone No.		Business Telephone No or Cell No	

**Indicate which fees you want waived for EACH student by placing an X in the appropriate box**  
**M.S.F = Mandatory School Fees, Trans = Transportation Fee**

Name of Student (s)	School (s) Attending	Grade	M.S.F	Trans

**Has optional fees been paid to the school**    Yes    No   (this will be verified with the schools)

**SECTION B: CONFIDENTIAL FINANCIAL INFORMATION**

**Number of people residing in household:**   No. adults \_\_\_\_\_   No. of children \_\_\_\_\_

Please complete the following information based on your 2019 income tax return(s) and attach photocopies for **each adult** from the Canada Revenue Agency a **Notice of Assessment**.

	<b>Total Income per Line 260 of 2019 Tax Return</b>
Wage Earner #1 income	\$ _____
Wage Earner #2 income	\$ _____
Other income	\$ _____
<b>TOTAL</b>	\$ _____

**SECTION C: SCHOOL PRINCIPALS RECOMMENDATION - Applies to Mandatory Instruction Fees ONLY**  
 (this section may be replaced by an email from the school principal)

Email from the principal to follow.

\_\_\_\_\_  
Principal Signature

\_\_\_\_\_  
Date

**SECTION D: FINAL DECLARATION AND OTHER INFORMATION**

I have attached a separate sheet outlining additional details for consideration.

*I certify that the information provided on this application and in any documents attached is correct and complete. I also understand that financial and other information provided above is confidential.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**ALL APPLICATIONS WITH INSUFFICIENT INFORMATION WILL NOT BE PROCESSED.**

The personal information contained on this form is collected under the authority of the *School Act* and of Alberta's *Freedom of Information and Protection of Privacy Act* for the purposes noted above.

Original – DO

<b>Office Use Only</b>
Authorized by: _____
Date: _____

## INSTRUCTIONS FOR COMPLETION OF WAIVER APPLICATION

**Final consideration for waiver requests will be the 1st week of December in any given year.**

If your child is enrolled in a program of choice, mandatory School fees and transportation fees will not be considered for a fee waiver.

**Fees already paid are not subject to a refund.**

1. When a parent has shared custody of one or more child (ren) a **Notice of Assessment** is required from both parents.
2. Once amounts are sent for collection, the amount is no longer eligible for fee waiver consideration.

**Section A:** *MUST* be completed by all applicants. Name of applicants should be for Parent, Guardian, or Independent student. Information in Section A should be for the same person that signed the student registration form. This will be verified prior to processing the application.

**Section B:** School Fees Section B may be omitted upon the Principals recommendation (Section C). If there are additional circumstances that directly impact this waiver application, please feel free to attach a separate sheet outlining the details for consideration.

***When completing Section B the following documentation to support the application must be provided.***

- Photocopies of each adult 2019 official **Notice of Assessment** (available by phoning **1-800-959-8281**) or by going to the website at [www.cra-arc.gc.ca/myaccount](http://www.cra-arc.gc.ca/myaccount) and setting yourself up for a Government of Canada epass)

**Section C:** If Section C is not completed you **MUST** complete Section B for a waiver of all Mandatory School Fees (M.S.F.) or a combination of Mandatory School Fees and Transportation Fees. **THIS SECTION IS NOT REQUIRED FOR A WAIVER OF TRANSPORTATION FEES ONLY.**

**Section D:** Final declaration and other information provided to process the application.

3. Sign and mail, deliver or fax the completed application form with supporting document(s) to:

Greater St. Albert Catholic Schools, Secretary-Treasurer  
6 St. Vital Avenue, St. Albert, Alberta T8N 1K2  
Fax: 780-458-3213

Marked "CONFIDENTIAL"

4. You will be notified of a decision in writing within approximately three weeks, copies of all approvals and/or conditional approvals will be provided to the school principal or designate of the associated school(s).
5. Eligibility for a waiver is based on the combined taxable income for each adult residing at the same address. The following chart of income levels outlines how the waiver of fees will be determined for the 2019-2020 school year. The definition of an adult is an individual who is 18 years old or older.

### # of Adults and Children

<b><u>Per Household</u></b>	<b><u>Full Waiver</u></b>
Single parent with 1 child	\$26,023
Single parent with 2 children	\$31,010
Single parent with 3 children	\$36,325
Single parent with 4 children	\$41,957
Couple with 1 child	\$31,237
Couple with 2 children	\$36,634
Couple with 3 children	\$41,594
Couple with 4 children*	\$46,932

**Note: Each application will be assessed on its own merit and will only apply to the current school year. This waiver application is in accordance with Administrative Procedures 503 posted on the division website.**

\*For each additional child, add \$4,973

Alberta Adult Health Benefit Plan used as a guideline

**Any application missing information will be returned to the applicant for completion.**