2025-2026 Fee Waiver Application and Instructions

Final consideration for waiver requests will be the Friday of the 1st week of December, in the school year the request is being submitted for.

If your child is enrolled in a program of choice or school of choice or Out of Division student, Mandatory School fees (MSF) and transportation fees will **NOT** be considered for a fee waiver. Ineligible riders do not qualify for Transportation fee waiver; however, School Fee Waiver may be considered. **Complimentary courses, Extra Curricular, Activity and Graduation fees are not eligible for waiver consideration. 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.

<u>Section A:</u> 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.

<u>Section B:</u> School Fees only 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 <u>Section B</u> the following documentation to support the application must be provided.

• Photocopies of each adult 2024 official Notice of Assessment (available by phoning 1-800-959-8281) or by going to the website at www.cra-arc.gc.ca/myaccount and setting yourself up for a Government of Canada epass)

<u>Section C:</u> 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 email the completed application form with supporting document(s) to:

Greater St. Albert Catholic Schools, Transportation Manager 6 St. Vital Avenue, St. Albert, Alberta T8N 1K2 lturnbull@gsacrd.ab.ca

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 2025-2026 school year. The definition of an adult is an individual who is 18 years old or older.

# of Adults and Children Per Household	100% Waiver	50% Waiver	Note: Each application will be Assessed on its own r and will only apply to the current school year.
Single Parent With 1 Child	\$26,023	\$26,024 - \$28,023	This waiver application is in accordance with
Single Parent with 2 Children	\$31,010	\$31,010 - \$33,010	Administrative Procedure 503 (Uncollectable Fee
Single parent with 3 children	\$36,325	\$36,325 - \$38,325	posted on the Divisions Website.
Single parent with 4 children	\$41,957	\$41,957 - \$43,957	
Couple with 1 child	\$31,237	\$31,237 - \$33,237	
Couple with 2 children	\$36,634	\$36,634 - \$38,634	
Couple with 3 children	\$41,594	\$41,594 - \$43,594	For Each Additional child, add \$4,973
Couple with 4 children	\$46,932	\$46,932 - \$48,932	
The Alberta Adult Health Benefit	Plan used as a Guid		

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



Application for 2025/2026 Waiver of Transportation and/or Mandatory Instruction Fees

Please read instructions before completing this application.

SECTION A: (Please print)						
· · · ·		COMPLETE	D FOR ALL F	REQUEST	TS	
Applicant Parent(s)/ Guardian (s) or Indepen	ndent Student					
Last Name	Firs	st Name				
atura						
street Address	City/town	!		Postal Code		
Home phone Number		Collular ph	one number			
Indicate which fees you v	vant waived for E4	*		X in the	annronriate	box
	Mandatory School				appi opi iuce	DUA
Name of Student (s)		School (s) Attending	Grade M.S.F		Tran
						ļ
Has optional fees been paid to	the school 🖂	Yes 🗆 No	(this will be v	verified with	n the schools)	
SECTION B: C	ONFIDENTIAL F	INANCIAL	INFORMATI	ON		
Number of people residing in ho	usehold: No. adul	ts	No. of children	I	-	
Wage Earner #1 Wage Earner #2 Other income		\$ \$ \$ \$				
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Date: