

Application for Waiver of Fees

APPLICATION DEADLINE DECEMBER 15, 2020

PLEASE READ BOTH SIDES PRIOR TO FILLING OUT FORM and complete section A and either B or C

1) Waiver Covers Fees for: Instructional Materials, Course Fees, Instructional Activities

2) Waiver does NOT cover fees for: Program of Choice, Non-Resident, Extracurricular Activities, Lockers, Yearbooks or other misc fees

3) Waivers will not be approved if any students in <u>the family</u> have books outstanding from previous years. All books must be returnedor paid for before the fee waiver can be approved

SECTION A: P	ARENT/GUARDIAN			
Last Name	First Name			
Street Address	City	Province	Postal Code	
Home Telephone No	Business Telephone No.	Email address*	:	
Number of people	residing in household: No. adults	No. childr	en	
Name of Child(ren) (Include all)		School(s) Attending		

SECTION B: CONFIDENTIAL FINANCIAL INFORMATION : Please Choose one of the following:

□ I have attached a copy of a **2018 OPTION C FORM** for **ALL** adults in the household. Option C's may be obtained at no charge by calling the Canada Revenue Agency at **1-800-959-8281**. **PLEASE DO NOT SEND NOTICE OF ASSESSMENT**!!!!!

□ I have attached a copy of an August or later Social Services Health benefits card (must list the students as your dependants)

□ I have attached a copy of my Alberta Works Health benefit card WITH proof of eligibility letter (must list the students as dependents)

I am an independent student and have attached the Declaration of Independence form signed by the school counsellor

SECTION C: EXCEPTIONAL CIRCUMSTANCES Please refer to information on the back of this form

□ My circumstances are exceptional and I have provided the necessary documents as **outlined on the back of this form**

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

Signature

Date

EXCEPTIONAL CIRCUMSTANCES

Check **Section C** on front if there are exceptional circumstances that are affecting your ability to pay your fee(s). In order to be considered for exceptional circumstances all of the following criteria must be met:

- 1) Provide a detailed letter explaining your circumstances
- 2) Attach supporting documents that substantiate your claim such as the following: Photocopies of your current reporting card and cheque stub for Employment Insurance Benefits (name and amount received must be visible) Letter from your present employer stating your current gross income Letter from school/university you are attending full time or a photocopy of your student loan A current statement from Social Services certifying that the applicant is on social assistance and the student(s) is/are dependent(s) of the applicant Resettlement assistance program documents
 2) Waiver must also be signed by Bringing (a) of your shild (sen) (a school (a))
- 3) Waiver must also be signed by Principal(s) of your child(ren)'s school(s)
- 4) Final decision rests with the Secretary-Treasurer

The following chart of family income levels outlines how the waiver of fees will be determined for the 2019-2020 school year

<u># of Adults and Children Per</u> <u>Household</u>	<u>100% Waiver</u>	50% Waiver
1 person	< \$22,185	\$22,186 - \$29,572
2 persons	< \$27,617	\$27,618 - \$36,813
3 persons	< \$33,952	\$33,953 - \$45,258
4 persons	< \$41,223	\$41,224 - \$54,951
5 persons	< \$46,754	\$46,755 - \$62,324
6 persons	< \$52,732	\$52,733 - \$70,292
7 or more persons	< \$58,709	\$58,710 - \$78,259

Statistics Canada information used as a guideline

Sign and mail the completed application form with supporting document(s) to:

LIVINGSTONE RANGE SCHOOL DIVISION Associate Superintendent, Business Services P.O. Box 1810 Fort Macleod, Alberta TOL 020 Mark "CONFIDENTIAL" on the envelope

*Please include an email if you would like notification of approval

**You are liable for your school fees until which time you have been notified by our office with an approval notification. It is our goal to process your fee waiver within 3 weeks of the receipt date. If you have submitted a fee waiver and have not heard back with a reasonable time frame please contact our office at 403-625-3356.