



WAIVER OF FEES APPLICATION (PRSD STUDENTS ONLY)

Please read both sides of this form prior to filling it out. Complete Sections A and either B or C

Section A: Parent/Guardian	School Year: 202 / 202
Last Name: _____	First Name: _____
Email address: _____	
Mailing Address: Street / Box No. _____	Town: _____ AB. _____
Home Ph. No. _____	Work Ph. No. _____ Cell No. _____

Name of Child (ren) Please include all children	Grade	School(s) Attending	Waiver Type

Section B: Financial Information

Number of adults living in household: _____

Number of children (under age of 18) living in household: _____

Total Number of people living in household: _____

	Total Income	Current Employer or Source of Income
Total income for Wage earner 1	\$ _____	_____
Wage earner 2	\$ _____	_____
Wage earner 3	\$ _____	_____
Wage earner 4	\$ _____	_____
TOTAL Household income based on all sources	\$ _____	

Please provide proof of **TOTAL HOUSEHOLD INCOME** for one year. Current pay stubs , Employment Benefits, Social Assistance confirmation letter, support payments may be considered proof of income.

- I have attached a copy of Proof of Income (**OPTION C FORM**) for **ALL** adults in the household. Option C Forms may be obtained at no charge by calling the CRA
- I have attached a copy of current pay stub(s)
- I have attached a copy of my Alberta Works Health benefit card **WITH** proof of eligibility letter (must list the students as dependents.)

