



# Application for Waiver of Fees

2024-2025 SCHOOL YEAR

**\*\*APPLICATION DEADLINE DECEMBER 13, 2024\*\***

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

**Waiver Covers:**

- Activity Fees - Curricular Field Trips (incl. Swimming)
- Enhanced Art/Programming Fee
- Non-Curricular Goods & Services - Agenda, Locks/Locker, Student Union, Fitness fees, Parking Pass & Kanga Pouch
- Noon Hour Supervision
- Optional Course Fees - **Jr. & Sr. High to a maximum of \$100/fee**
- Technology Fee
- Transportation - Eligible

**Waiver Does NOT Cover:**

- Adult Education - Tuition
- Alternative Program/Program of Choice - Pre-K, Full Day K, Nature, Sport 4 Life, Performing Arts and Sports Academy
- Caution Fee Deposit
- Extra-Curricular - Individual & Team Sports, Clubs or Ski Trips
- Hot Lunch & Milk Programs
- International Student Tuition
- Lost Items - Replacement Fees (Including Library and Textbooks)
- Non-Curricular Travel - Local, Out of Province or International
- Optional Field Trips
- Sales of Other Supplies or Services - Yearbooks, Clothing, Calculator, Recorders, Proctor Fee or Workbooks
- Special Events - Grad fees & Tickets, Drama or Performance Tickets
- Summer School Registration Fee
- Transportation - Ineligible, Supplemental or Non-Resident

- 1) Waivers will not be approved if any students in the family have books outstanding from previous years.  
All books must be returned or paid for before the fee waiver can be approved**
- 2) Any applicable 2024-2025 Eligible Transportation Fees that you have paid will be refunded or applied to any outstanding fees upon approval of this waiver form. All other paid fees are not subject to a refund.**
- 3) When a parent has shared custody of one or more children a Notice of Assessment form is required from both parents**
- 4) Fee waivers will not be considered for any amounts that have previously been sent to collections**
- 5) Please refer to AP 505 - School Fees and Charges**

**SECTION A: PARENT/GUARDIAN**

Last Name	First Name		
Street Address	City	Province	Postal Code
Home Telephone No	Business Telephone No.	Email address*:	
<b>Number of people residing in household: # of Adults: _____ # of Children: _____</b>			

Name of Child(ren) (Include all)	Grade level	School(s) Attending	Bussing used (yes/no)

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

- I have attached a copy of a **2023 Notice of Assessment** for **ALL** parent(s)/guardian(s). Notice of Assessment's may be obtained at no charge by calling the Canada Revenue Agency at **1-800-959-8281**.
- I have attached a copy of an August or later Social Services Health benefits card (**must list the students as your dependents**)
- 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 counselor

**SECTION C: EXCEPTIONAL CIRCUMSTANCES Please refer to the information below**

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

**EXCEPTIONAL CIRCUMSTANCES**

Check **Section C** above 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) Copy of a **2023 Notice of Assessment** for **ALL** parent(s)/guardian(s)
- 3) 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
- 4) Waiver must also be signed by Principal(s) of your child(ren)'s school(s)
- 5) Final decision rests with the Secretary-Treasurer

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*I c e r t i f y 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.*

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Signature

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Date

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**Principal's signature for exceptional circumstances only**

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The following chart of family income levels outlines how the waiver of fees will be determined for the 2024-2025 school year.

<u># of Adults and Children</u> <u>Per Household</u>	<u>100% Waiver</u>	<u>50% Waiver</u>
Independent Student	< \$16,580	\$16,580 - \$22,051
1 Adult + 1 Child	< \$26,023	\$26,023 - \$34,611
1 Adult + 2 Child	< \$31,010	\$31,010 - \$41,243
1 Adult + 3 Child	< \$36,325	\$36,325 - \$48,312
1 Adult + 4 Child	< \$41,957	\$41,957 - \$55,803
2 Adults + 1 Child	< \$31,237	\$31,237 - \$41,545
2 Adults + 2 Child	< \$36,634	\$36,634 - \$48,723
2 Adults + 3 Child	< \$41,594	\$41,594 - \$55,320
2 Adults + 4 Child	< \$46,932	\$46,932 - \$62,420

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

*Alberta Health Benefit information used as a guideline*

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

**Elk Island Catholic Schools**  
**Attn: Secretary-Treasurer**  
**310 Broadview Road**  
**Sherwood Park, Alberta T8H 1A4**

**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 780-467-8896.**