

## PARENT(S)/STEP-PARENT/SPONSOR/LEGAL GUARDIAN INFORMATION

WHO COMPLETES  
APPENDIX 1?

The applicant's parent(s)/step-parent/sponsor/legal guardian.

If your parent(s)/step-parent/sponsor/legal guardian lives outside of Canada you will need to:

- mail **Appendix 1** to them for completion or have them download and print **Appendix 1** from [www.StudentAidBC.ca](http://www.StudentAidBC.ca) and
- have them return it to you by mail to submit with your application.

## PURPOSE

The information in **Appendix 1** is necessary to assess how much money the applicant's parent(s)/step-parent/sponsor/legal guardian may be required to contribute. Please answer all questions.

**The applicant will have access to all information provided on Appendix 1.**

## NOTE

Instructions for your parent(s)/step-parent/sponsor/legal guardian are printed on the other side of this page. Do not separate these pages before Appendix 1 is complete.

If you have already submitted your StudentAid BC application, and you are completing a new Appendix 1 to make changes to your original submission, include an Appendix 7 - Request for Reassessment, with your submission.

No faxes, scans or copies are accepted as original signatures are required.

## ARE YOU A 'Group A' (Dependent) STUDENT?

## A 'Group A' student:

- has **not** been out of high school for at least 48 months (4 years); and
- is **not** married, living common-law, separated, divorced, widowed or a single parent; and
- has **not** worked in the full-time labour force for two periods of 12 continuous months each since leaving high school; and
- is **not** a youth in continuing care or custody of a director of child welfare in B.C. – the government is/was your legal guardian.

If you are a 'Group A' student, **Appendix 1** must be completed by your parent(s)/step-parent/sponsor/legal guardian.

If you are a permanent resident or landed immigrant under sponsorship, your sponsor must complete **Appendix 1**.

If your parents are separated or divorced, or if your parent is single, Appendix 1 must be completed by the parent who is your main financial supporter.

## When Appendix 1 has been completed and returned to you:

- Enter your application number on **line 4**.
- Make sure all questions have been answered and both the Canada Revenue Agency consent and the StudentAid BC declaration on **Appendix 1** have been completed and signed.

When you are sure it is complete, separate Appendix 1 from this instructions page and staple it to the inside back of your application.

## FEDERAL POLICY

“Parents are expected to plan for and make adequate financial preparation in anticipation of the student's post-secondary education. It is expected that the funding of the student's education will be a priority for the family. Situations that arise due to lack of preparation or due to the directing of resources towards priorities other than the student's education will not normally be considered.”

A financial contribution (based on federal policy) may be expected from your parent(s)/step-parent/sponsor/legal guardian, based on family size, income, assets and allowable income deductions.

The contribution formula takes into account parent(s)/step-parent/sponsor/legal guardian's gross income as declared on line 150 of their 2012 income tax return, less income taxes payable, Canada Pension Plan contributions, employment insurance contributions and a moderate standard of living. The income remaining following the deductions of these amounts is called “**discretionary income**.”

## CONTACT INFORMATION

**TO REACH StudentAid BC BY PHONE:**  
**1-800-561-1818** Toll-free in Canada or USA  
 or  
**(250)-387-6100** from outside North America

Visit us on-line at [www.StudentAidBC.ca](http://www.StudentAidBC.ca)

**TO REACH StudentAid BC BY MAIL:**  
**StudentAid BC**  
**Mailing address:**  
 P.O. Box 9173 Stn Prov Govt  
 Victoria B.C. V8W 9H7  
**Courier address:** StudentAid BC  
 1st Floor, 835 Humboldt Street  
 Victoria B.C. V8V 4W8

**\*Note:** The ⓘ symbol means to read the *INSTRUCTIONS* booklet, which is included in the *StudentAid BC* application package or visit [www.StudentAidBC.ca](http://www.StudentAidBC.ca).

### Question 06 Marital Status

Mark the appropriate box. If you have remarried or are in a common-law relationship, your partner must provide his or her financial information. If you are separated, divorced or single this form must be completed by the parent who has legal responsibility for the applicant's post-secondary education and/or is the main financial supporter.

### Question 07 Gross Income

Enter the amount from line 150 of your 2012 income tax return. The line 150 amount you report will be verified against Canada Revenue Agency (CRA) records. If the amount you indicate is different from their records, CRA data will be used in the applicant's needs assessment calculation. If CRA records are incorrect, you must submit an Appendix 1 (and Appendix 7) with documentation showing the correct amount. If you did not file a Canadian Income Tax Return, enter your total 2012 **gross income from all sources both inside and outside Canada, including** employment, pension, investment, net rental, RRSP, foster parent, net professional income, workers' compensation, employment insurance, disability assistance, etc. Convert foreign currency into Canadian dollars. If you are married or living common-law, both Parent #1 and Parent #2 incomes must be completed even if "0". Round all amounts to the nearest dollar. Single parents must complete and sign the "Parent #1" section of Appendix 1.

### Question 08 Net Value of Assets

Include the net value of all **Canadian and foreign** assets, including term deposits, stocks, bonds, GICs, bank accounts, rental properties, etc. Do not include RRSPs, principal residence, business assets, vehicles or household items.

### Question 09-12 Deductions

Refer to your 2012 income tax return to determine the amounts deducted for income taxes, Canada Pension Plan contributions and employment insurance contributions. If no deductions, enter '0' on appropriate lines.

### Question 14 Dependants

For StudentAid BC purposes, eligible dependants are any dependants for whom you receive the Canada Child Tax Benefit or for whom you claim a benefit on your 2012 income tax return. Eligible dependants include:

- your child(ren) under 19 years of age as of the start of the applicant's classes, for whom you have custody or provide care (they live with you) at least two days per week during the applicant's entire study period; or
- your child(ren) age 19 or over who are Group A full-time students (see definition of 'Group A' status on ⓘ **page 7**); or
- your permanently disabled child(ren) age 19 or over, who you fully support and declare on your income tax return; or
- your foster children, if foster parent income is claimed on Appendix 1 on line 7; or
- your elderly relatives who you fully support and declare on your income tax return.

### Declaration and Consent

Read, sign and date **both** the Canada Revenue Agency consent and the StudentAid BC declaration. **Without the complete information, including dates and signatures, we cannot process the student's application.** Once you have completed this Appendix 1 return it to the student who will submit it with his or her application.



**CANADA REVENUE AGENCY CONSENT - must be signed and dated for this application to be complete**

**Parent #1**      ALL INFORMATION MUST BE PROVIDED

PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

**(15) LAST NAME**

**(16) FIRST NAME**      MIDDLE      **(17) GENDER**  
             MALE       FEMALE

**(18) DATE OF BIRTH**  
 YEAR      MONTH      DAY  
              

**(19) SOCIAL INSURANCE NUMBER**

**(20) ADDRESS**  
 Apt./suite number      STREET NUMBER/PO BOX  
      

STREET NAME

**(21) CITY/TOWN**

**(22) PROVINCE/STATE**      **(23) POSTAL/ZIP CODE**  
        

**(24) COUNTRY**

**(25) AREA CODE**      TELEPHONE NUMBER  
 (    )        -

**Parent #2**

PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

**(15a) LAST NAME**

**(16a) FIRST NAME**      MIDDLE      **(17a) GENDER**  
             MALE       FEMALE

**(18a) DATE OF BIRTH**  
 YEAR      MONTH      DAY  
              

**(19a) SOCIAL INSURANCE NUMBER**

**(20a) ADDRESS**  
 Apt./suite number      STREET NUMBER/PO BOX  
      

STREET NAME

**(21a) CITY/TOWN**


**(22a) PROVINCE/STATE**      **(23a) POSTAL/ZIP CODE**  
        

**(24a) COUNTRY**


**(25a) AREA CODE**      TELEPHONE NUMBER  
 (    )        -

For the purpose of verifying the data provided in this application for student assistance, I hereby consent to the release, by the Canada Revenue Agency, to the Ministry of Advanced Education, Innovation and Technology, and Minister Responsible for Multiculturalism (or a person delegated by the ministry), of taxpayer information from any portion of my income tax records that pertains to information given by me on any StudentAid BC application. The information will be used solely for the purpose of verifying information on my StudentAid BC application forms and for the general administration and enforcement of StudentAid BC policy and the *Canada Student Financial Assistance Act*. This authorization is valid for the two taxation years prior to the year of signature of this consent, the year of signature of this consent and for any other subsequent consecutive taxation year for which assistance is requested.

**Parent #1**  
PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

**(26) SIGNATURE (IN INK)**  
  
**(26a) DATE SIGNED**      YEAR      MONTH      DAY  
               

**Parent #2**  
PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

**(27) SIGNATURE (IN INK)**  
  
**(27a) DATE SIGNED**      YEAR      MONTH      DAY  
               

**StudentAid BC DECLARATION - must be signed and dated for this application to be complete**

**StudentAid BC DECLARATION - must be signed and dated for this application to be complete.**


- I. I understand that:
- 1) The student will have access to information provided in this appendix;
  - 2) The student's school will have access to information provided in this appendix;
  - 3) The information in this appendix is subject to audit and verification.

II. I understand that signing the Declaration means:  
 I certify that the information I have given is correct and complete and that I have not altered or added to any of the pre-printed application and/or appendix questions.  
 I have authorized the applicant to immediately notify StudentAid BC of any increase in my income and/or assets.


For the purposes of verifying the accuracy of the personal information provided by me in this appendix, I consent to the collection, use and disclosure of my personal information between the Ministry of Advanced Education, Innovation and Technology, the Ministry of Finance, the National Student Loans Service Centre, and any of their contractors, subcontractors or agents, each with each other, and with the following: financial institutions, lenders, educational institutions, financial aid offices, employers, credit bureaus, credit reporting agencies, Native Bands, Federal and provincial Crown corporations, and federal, provincial, municipal ministries/departments/agencies, including but not limited to: BC Ministry of Social Development, BC Ministry of Children and Family Development, BC Ministry of Health, BC Ministry of Justice, BC Ministry of Education, BC Public Service Agency, BC Office of the Superintendent of Motor Vehicles, Insurance Corporation of BC, BC Assessment Authority, Land title and Survey Authority of BC, BC Registry Services, Worksafe BC, BC Vital Statistics Agency, the Office of the Superintendent of Bankruptcy Canada, Human Resources and Skills Development Canada (HRSDC), National Student Loans Service Centre, Canada Revenue Agency, Citizenship and Immigration Canada. This consent takes effect when I sign this Declaration.

**Parent #1**      ALL INFORMATION IS SUBJECT TO AUDIT AND VERIFICATION

PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

**(28) SIGNATURE (IN INK)**  
  
**(28a) DATE SIGNED**      YEAR      MONTH      DAY  
               

**Parent #2**  
PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

**(29) SIGNATURE (IN INK)**  
  
**(29a) DATE SIGNED**      YEAR      MONTH      DAY  
               

**Collection and use of information.** The information included in this form and authorized above is collected and managed in accordance with Section 26 of the *Freedom of Information and Protection of Privacy Act*, and under the authority of the **Canada Student Financial Assistance Act**, R.S.C. 1994, Chapter C-28 and StudentAid BC. The information provided will be used to determine eligibility for a benefit through StudentAid BC. If you have any questions about the collection and use of this information, contact the Executive Director, StudentAid BC, Ministry of Advanced Education, Innovation and Technology, and Minister Responsible for Multiculturalism, PO Box 9173, Stn Prov Govt, Victoria B.C., V8W 9H7, telephone 1-800-561-1818 toll-free in Canada/U.S. or (250)-387-6100 from outside North America.

**WHEN COMPLETED, RETURN APPENDIX 1 TO THE STUDENT**