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 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, based on their previous year’s income tax return. Please answer all questions.

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

NOTE

Your parent(s)/step-parent/sponsor/legal guardian’s name(s), social insurance number(s) and date(s) of birth will be verified through Employment and Social Development Canada (ESDC) before your application is processed. If ESDC cannot verify the information, your application will not be processed. To contact Service Canada’s Employment Insurance Information Service, call: 1-800-206-7218.

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.

ARE YOU A DEPENDENT STUDENT?

A dependent 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 BC – the government is/was your legal guardian.

If you are a dependent 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.

RESIDENCY

Residency of a dependent student is determined by the residence of their parent(s) or by their sponsor if the student is under sponsorship. B.C. is considered the province of residence, if B.C. is the last province in which the parent(s) or sponsor lived for 12 consecutive months, as of the start of the student’s study period.

FEDERAL POLICY

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 total income as declared on line 150 of their 2017 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

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

EMAIL COMPLETED APPENDIX 1 TO:
SABC.AdminUnit@gov.bc.ca

Visit us online at www.StudentAidBC.ca
Appendix 1

HELP FOR PARENT(S)/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

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 34 – Contributions from parent(s)/step-parent/sponsor/legal guardian
A parent or guardian may wish to contribute funds toward the applicant’s educational costs over and above amount they are assessed to contribute as part of a student’s resource assessment. Enter total money given to the student for this study period, including the total amount of cashed Registered Education Savings Plans (RESPs) and scholarship trust funds.

Question 35 Total Income
Enter the amount from line 150 of your 2017 income tax return. The amount you report will be checked against Canada Revenue Agency (CRA) records. If the amount you report is different from CRA records, CRA data will be used in the applicant’s need assessment calculation. If your previous year total income (as reported on Line 150 of your 2017 tax return) changes, a reassessment of the applicant’s financial assistance application will be required. If you did not file a Canadian Income Tax Return for 2017, enter your total 2017 income from all sources both inside and outside Canada, which includes employment, pension investment, rental, RRSP, foster parent, net professional income, workers’ compensation, employment insurance and disability assistance. Convert foreign currency into Canadian dollars. StudentAid BC receives regularly updated information from CRA and may, after the point of initial StudentAid BC application assessment, compare income amount(s) declared on the application against CRA records, to ensure that the applicant’s financial need remains up-to-date and accurate.

Question 36 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.

Questions 37-40 Deductions
Refer to your 2017 income tax return to determine the amounts deducted for income taxes, Canada Pension Plan contributions and employment insurance contributions. If no deductions, you must enter ‘0’ on appropriate lines.

Dependants
For StudentAid BC purposes, eligible dependants are any dependants for whom you receive the Canada Child Benefit or for whom you claim a benefit on your 2017 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 dependent full-time students; 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.

ALL INFORMATION IS SUBJECT TO AUDIT AND VERIFICATION
II. I/we understand that signing this declaration means:

YEAR MONTH DAY

DATE OF BIRTH

(07) LAST NAME

PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN (MARK ONE BOX ONLY)

GUARDIAN A

STEP-PARENT SPONSOR/ LEGAL GUARDIAN

MARRIED B

SINGLEGUARDIAN

C

SINGLE PARENT D

COMMON- LAW

E

SEPERATED/ DIVORCED/ WIDOWED

I. I/we understand that:

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

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, investigation and verification as defined in the current program year’s StudentAid BC Policy Manual.
4. I/we understand that signing this declaration means:
5. I declare that the information I have given in this appendix is correct and complete and that I have not altered or added to any of the pre-printed application and/or appendix questions.
6. I authorize the student to notify StudentAid BC as soon as practical of any change in my income and/or assets, as defined in the current program year’s StudentAid BC Policy Manual.
7. The information in this appendix is subject to audit, investigation and verification as defined in the current program year’s StudentAid BC Policy Manual.
8. I/we understand that signing this declaration means:
9. I declare that the information I have given in this appendix is correct and complete and that I have not altered or added to any of the pre-printed application and/or appendix questions.
10. I authorize the student to notify StudentAid BC as soon as practical of any change in my income and/or assets, as defined in the current program year’s StudentAid BC Policy Manual.

Parent #1

PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

LAST NAME

FIRST NAME

MIDDLE NAME

DATE OF BIRTH

SOCIAL INSURANCE NUMBER

ADDRESS

STREET NAME

CITY/TOWN

PROVINCE/STATE

POSTAL / ZIP CODE

AREA CODE

TELEPHONE NUMBER

SIGNATURE (IN INK)

DATE SIGNED YEAR MONTH DAY

Parent #2

PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

LAST NAME

FIRST NAME

MIDDLE NAME

DATE OF BIRTH

SOCIAL INSURANCE NUMBER

ADDRESS

STREET NAME

CITY/TOWN

PROVINCE/STATE

POSTAL / ZIP CODE

AREA CODE

TELEPHONE NUMBER

SIGNATURE (IN INK)

DATE SIGNED YEAR MONTH DAY

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

I. I/we understand that:

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

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, investigation and verification as defined in the current program year’s StudentAid BC Policy Manual.
4. I/we understand that signing this declaration means:
5. I declare that the information I have given in this appendix is correct and complete and that I have not altered or added to any of the pre-printed application and/or appendix questions.
6. I authorize the student to notify StudentAid BC as soon as practical of any change in my income and/or assets, as defined in the current program year’s StudentAid BC Policy Manual.
7. The information in this appendix is subject to audit, investigation and verification as defined in the current program year’s StudentAid BC Policy Manual.
8. I/we understand that signing this declaration means:
9. I declare that the information I have given in this appendix is correct and complete and that I have not altered or added to any of the pre-printed application and/or appendix questions.
10. I authorize the student to notify StudentAid BC as soon as practical of any change in my income and/or assets, as defined in the current program year’s StudentAid BC Policy Manual.

Parent #1

PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

LAST NAME

FIRST NAME

MIDDLE NAME

DATE OF BIRTH

SOCIAL INSURANCE NUMBER

ADDRESS

STREET NAME

CITY/TOWN

PROVINCE/STATE

POSTAL / ZIP CODE

AREA CODE

TELEPHONE NUMBER

SIGNATURE (IN INK)

DATE SIGNED YEAR MONTH DAY

Parent #2

PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

LAST NAME

FIRST NAME

MIDDLE NAME

DATE OF BIRTH

SOCIAL INSURANCE NUMBER

ADDRESS

STREET NAME

CITY/TOWN

PROVINCE/STATE

POSTAL / ZIP CODE

AREA CODE

TELEPHONE NUMBER

SIGNATURE (IN INK)

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 sections 28(c) and 28(e) of the Freedom of Information and Protection of Privacy Act, R.S.B.C. 1996, c. 155, 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 and for research, statistical and evaluation purposes. If you have any questions about the collection and use of this information, contact the Executive Director, StudentAid BC, Ministry of Advanced Education, Skills and Training, PO Box 9173, Skn 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
How much will you and your spouse/common-law partner be giving the student during this study period? Please include money, total cashed Registered Education Savings Plans (RESPs) and scholarship trust funds. List only the student and eligible dependants as per the attached instructions page. Read ①.

Parent #1

YOU MUST ENTER ‘0’ IF NO INCOME OR ASSETS

PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

Enter your reported total income from line 150 of your 2017 income tax return. If you did not file a 2017 income tax return, enter your total income from all sources both inside and outside of Canada.

Enter the total net value of all Canadian and foreign assets (do not include RRSPs, principal residence or business). Enter ‘0’ if none.

Parent #2

PARENT/STEP-PARENT/SPONSOR/LEGAL GUARDIAN

Indicate amounts payable on your 2017 income tax returns

You must enter ‘0’ if no income or assets

Do not include your spouse/common-law partner

Student’s Application Number

2018

Parent(s)/Step-parent/Sponsor/Legal Guardian Information

Student's Name

Date of Birth

Year Month Day

Other Eligible Dependant Name(s) (Do not include student reported above)

Date of Birth

Y Y M M D D

Is Dependant Attending Post-Secondary?

Yes No

Was This Dependant Claimed on Your 2017 Tax Return?

Yes No

You must complete the reverse side of this appendix