

Application to determine eligibility for the reduced contribution

The letters in a square (example: **A**) appearing on this form refer to the list of documents to be attached. It is important to check the boxes on the back of this form that correspond to your situation. You must give the childcare provider this form, duly completed and signed, together with each of the documents for which the box has been checked on the back of this form so that a decision can be made as to your eligibility.

Section 1 – IDENTIFICATION			
Parent <i>The holder of parental authority or the person who has custody of the child.</i>			
Last name	First name	Social Insurance Number	
Home address			
Number Street, Avenue, Boulevard, P.O.Box			Apartment
Town/City, Municipality		Province	Postal code
Telephone number (home)	Area code	Telephone number (work)	Area code Extension
What is your relationship to the child or children? <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other		Are you a Canadian citizen? <input type="checkbox"/> Yes A <input type="checkbox"/> No A and B	
If you are submitting an application for more than two children, please use a second form and indicate the child's rank (3rd, 4th, etc.).			
First child		Second child	
Last name		Last name	
First name		First name	
Date of birth A		Date of birth A	
Section 2 – CHILDCARE NEEDS			
Check (✓) the box that corresponds to your needs.			
First child referred to in this application		Second child referred to in this application	
<i>Child under 5 years of age on September 30th of the reference year</i> E		<i>Child under 5 years of age on September 30th of the reference year</i> E	
<input type="checkbox"/> Continuous period from 2 1/2 to 4 hours per day <input type="checkbox"/> Continuous period of more than 4 hours per day up to a maximum of 10 hours per day		<input type="checkbox"/> Continuous period from 2 1/2 to 4 hours per day <input type="checkbox"/> Continuous period of more than 4 hours per day up to a maximum of 10 hours per day	
<i>Child 5 years of age or older on September 30 of the reference year, who cannot be accommodated in a childcare service in a school daycare environment due to the absence of such service or no available space</i> F		<i>Child 5 years of age or older on September 30 of the reference year, who cannot be accommodated in a childcare service in a school daycare environment due to the absence of such service or no available space</i> F	
<input type="checkbox"/> Continuous period or interrupted periods totaling at least 2 1/2 hours per day for a maximum daycare period of 5 hours per day between 6:30 a.m. and 6:30 p.m.		<input type="checkbox"/> Continuous period or interrupted periods totaling at least 2 1/2 hours per day for a maximum daycare period of 5 hours per day between 6:30 a.m. and 6:30 p.m.	
Anticipated date of the first day of daycare		Anticipated date of the first day of daycare	
Anticipated date of the end of daycare (if you know it)		Anticipated date of the end of daycare (if you know it)	
Section 3 – FINANCIAL ASSISTANCE PROGRAMS (Aim for Employment Program, Social Assistance Program, Social Solidarity Program, Alternative Youth Program, or Income Security Program for Cree Hunters and Trappers)			
3.1 Do you receive benefits under the Aim for Employment Program, the Social Assistance Program, the Social Solidarity Program, or the Youth Alternative Program provided for by the Individual and Family Assistance Act (Chapter A-13.1.1), or under the Income Security Program for Cree Hunters and Trappers? <input type="checkbox"/> Yes C <input type="checkbox"/> No			
If you answered No , go to Section 4 – INFORMATION REQUIRED IN THE CASE OF RE-ENROLLMENT			
Please sign the authorization to release information if you receive benefits under a financial assistance program covered by this section.			
I authorize the Ministère de la Famille to verify, within the context of the reduced contribution exemption, my eligibility for the Aim for Employment Program, the Social Assistance Program, the Social Solidarity Program, the Youth Alternative Program, or the Income Security Program for Cree Hunters and Trappers.			
Parent's signature		Date	
		Year Month Day	
Section 4 – INFORMATION REQUIRED IN THE CASE OF RE-ENROLLMENT			
4.1 Since September 1 of the reference year, have you benefited from the reduced contribution or, if you are receiving benefits through a financial assistance program covered by Section 3, have you been exempted from the payment of the reduced contribution? <input type="checkbox"/> Yes D <input type="checkbox"/> No			
Section 5 – SIGNATURE			
I declare that the information appearing on this application is accurate and complete. Please note that under the <i>Reduced Contribution Regulation</i> , the parent must immediately notify the childcare provider of any change affecting the information and the documents used to establish their eligibility for the reduced contribution or for the exemption from its payment.			
Parent's signature		Date	
		Year Month Day	

LIST OF DOCUMENTS TO BE ATTACHED

Check (✓) the boxes that correspond to your situation according to the letters in a square appearing on the form.

A The birth certificate of the parent or, in the case of a parent having Canadian citizenship, any other document establishing Canadian citizenship (citizenship card, certificate of Canadian citizenship, Canadian passport, certificate of a Canadian birth abroad, certificate of Indian status).

A The birth certificate of the first child referred to in this application.

A The birth certificate of the second child referred to in this application.

IMPORTANT: Your birth certificate or, if applicable, the document establishing your Canadian citizenship, as well as the birth certificate of your child or children must be submitted to the childcare provider. A photocopy, certified as being a true copy of the original by the childcare provider, must be kept in the parent's file.

B If you are not a Canadian citizen and if you are unable to provide your birth certificate or that of your children, you will have to make a statement under oath explaining the reasons why you are unable to provide these documents and specifying the date of birth of your child or children, as the case may be. In addition, if you are not a Canadian citizen, please check (✓) the box pertaining to your status in the following table and submit the required documents depending on your status.

TABLE OF ADDITIONAL DOCUMENTS REQUIRED FROM A PARENT WHO IS NOT A CANADIAN CITIZEN

Permanent Resident <input type="checkbox"/>	Person authorized to submit an application for permanent residence on site <input type="checkbox"/>	Foreigners with a status			
		Temporary Worker <input type="checkbox"/>	Foreign student <input type="checkbox"/>	Holder of a temporary residence permit <input type="checkbox"/>	Refugee Person requiring protection Protected person <input type="checkbox"/>
Required documents	Required documents	Required documents	Required documents	Required documents	Required documents
Copy of record of landing (IMM-1000) or Copy of the permanent resident card or Copy of the confirmation of permanent residence issued by Canadian immigration authorities	Copy of the letter issued by Canadian immigration authorities establishing that the person is authorized to submit in Canada an application for permanent residence and Copy of the selection certificate issued pursuant to section 3.1 of the Act respecting immigration to Québec	Copy of the work permit issued by Canadian immigration authorities or If the foreign national is exempted from the obligation of being the holder of such a permit, copy of the document attesting to his right to be in Canada	Copy of the certificate of acceptance issued pursuant to section 3.2 of the Act respecting immigration to Québec and Copy of a letter from the <i>Ministre de l'Éducation et de l'Enseignement supérieur</i> attesting that the person is a recipient of a bursary from the Government of Québec in application of the policy related to foreign students in the colleges and universities of Québec	Copy of the temporary residence permit, whose codification establishes that it has been issued for the possible granting of permanent residence status and Copy of the selection certificate issued pursuant to section 3.1 of the Act respecting immigration to Québec	Copy of the selection certificate issued pursuant to section 3.1 of the Act respecting immigration to Québec and Copy of the letter from the appropriate Canadian authority establishing that the person is a refugee or a person requiring protection or a protected person under the Immigration and Refugee Protection Act

C Proof that you are receiving benefits under the Aim for Employment Program, the Social Assistance Program, the Social Solidarity Program, or the Youth Alternative Program provided for by the Individual and Family Assistance Act (Chapter A-13.1.1), or under the Income Security Program for Cree Hunters and Trappers.

D An attestation of the daycare services received specifying notably the date when the child begins daycare, the date when daycare services end, and the total number of days of childcare at a reduced contribution which you have benefited from since September 1 of the reference year. If you receive benefits under the Aim for Employment Program, the Social Assistance Program, the Social Solidarity Program, the Youth Alternative Program, or the Income Security Program for Cree Hunters and Trappers the total number of childcare days for which you have been exempted from paying the reduced contribution.

E A copy of the daycare agreement signed by the person in charge of a home daycare operation, where applicable.

F An attestation signed by the principal of the school attended by the child, five years of age or over, on September 30 of the reference year establishing the absence of a childcare service in a school daycare environment or the absence of an available space, whichever is the case.

RESERVED FOR THE ADMINISTRATION

DECISION OF THE PERMIT HOLDER OR THE HOME CHILDCARE COORDINATING OFFICE

Identification

Name of permit holder or coordinating office	Establishment number
Last name of the home childcare provider	First name

Decision

Yes The parent's application is accepted; the parent meets all of the conditions stipulated in the Act or in the Reduced Contribution Regulation.

No The parent's application is rejected for the following reasons:

To be completed if the parent receives benefits under a financial assistance program covered in Section 3 (Aim for Employment Program, the Social Assistance Program, the Social Solidarity Program, the Youth Alternative Program, or the Income Security Program for Cree Hunters and Trappers)

The parent is exempted from the payment of the reduced contribution Yes No

First child referred to in this application

Second child referred to in this application

Date when daycare starts	Date when daycare starts
Year Month Day	Year Month Day
Date of the decision	Date of the decision
Year Month Day	Year Month Day

Signature

Date

Year	Month	Day
------	-------	-----

RIGHT TO REVIEW

A parent who feels that he has been wronged by the decision of a permit holder or a home daycare coordinating office can ask the Minister to review this decision. The application must be made in writing and briefly outline the reasons given. It must be submitted to this address within 90 days following the date on which the parent is informed of the decision:

Secrétariat général, ministère de la Famille, 425, rue Jacques-Parizeau, Québec (Québec) G1R 4Z1.