

2019-2020 JUNIOR KINDERGARTEN BURSARY APPLICATION FORM



Finance Department
A100-123 Doncaster Street
Winnipeg, Manitoba R3N 2B4
204.477.7482
finances@grayacademy.ca

To Apply for Junior Kindergarten Bursary Assistance:

Submit this application with corresponding document(s) by email to finances@grayacademy.ca or send to the school office in an envelope addressed to the Finance Department (marked CONFIDENTIAL). **Deadline for application is**

March 29, 2019. Late applications will be subject to availability. Only complete applications will be processed.

Limited bursary assistance may be available for families with **very high need** and will be assessed on a case-by-case basis.

The request for bursary assistance does not guarantee that bursary support will be given. Bursary assistance will be considered based on need, financial circumstances of applicants and availability of funds. Priority is given to those most in need. Bursary assistance in one year does not guarantee assistance in another year. Each year must be treated separately to reflect available funds and family circumstances

Tax Deductibility: In accordance with the policies outlined in Canada Revenue Agency Information Circular 75-23, parental contributions for students in Junior Kindergarten may qualify as a childcare expense on your income tax return. Please consult a tax professional.

This form must be signed by both parents/guardians (if applicable).

Separated/divorced parents/guardians can submit one combined form or one form per person.

PREVIOUS CHILDCARE EXPENSES	
<i>Please list the childcare expenses for your child(ren) in each tax year (please attach supporting documents for the information below).</i>	
2018	
Daycare/Childcare Program Attended	Annual Fees Paid \$ _____
Did you receive any bursary or subsidy support? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Annual Amount Received = \$ _____	
2017	
Daycare/Childcare Program Attended	Annual Fees Paid \$ _____
Did you receive any bursary or subsidy support? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Annual Amount Received = \$ _____	

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Reason for seeking bursary assistance: Fully outline below the reason for your request, the amount requested and provide supporting documents if applicable. Please keep in mind that JK fees can qualify as a childcare expense on your income tax return.

PARENT/GUARDIAN INFORMATION		
Full Name		
Street Address	City	Postal Code
Employment Status <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Self Employed <input type="checkbox"/> Unemployed		
If self employed: do you own a corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Occupation	Employer	

PARENT/GUARDIAN INFORMATION		
Full Name		
Street Address (if different than above)	City	Postal Code
Employment Status <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Self Employed <input type="checkbox"/> Unemployed		
If self employed: do you own a corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Occupation	Employer	

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CHILDREN		
	Full Name	Date of Birth (mm/dd/yyyy)
First Child		
Second Child		
Third Child		
Fouth Child		
Fifth Child		

If you have previously completed any of the information below on the:
 Bursary Application Form - *skip to section: Value of Assets*
 Additional Bursary Assistance Application - *skip to final section for your signatures*

FINANCIAL INFORMATION
<p><i>Please complete below. Place a value of \$0 to those lines that do not apply. Please check only one of the following:</i></p> <p><input type="checkbox"/> We/I have completed our 2018 income tax return (attach Notice of Assesment if received) - Complete Table A only</p> <p><input type="checkbox"/> We/I have not completed our 2018 income tax return - Complete Table A & B</p> <p><input type="checkbox"/> We/I have lived in Canada for less than 12 months in 2018 (see pg. 4 for supporting documents needed) - Complete Table C only</p>

TABLE A			
	Parent/Guardian	Parent/Guardian	Total
1 Line 150 of 2018 tax return (skip to number 3)	\$ _____	+ \$ _____ =	\$ _____
2 If you have not completed your income tax return, please calculate your income using Table B below and list here	\$ _____	+ \$ _____ =	\$ _____
3 Alimony/maintenance payments received in 2018	\$ _____	+ \$ _____ =	\$ _____
4 Other 2018 <u>non-taxable</u> amounts received or expected to receive during the year (such as gifts, insurance benefits, inheritance etc.)	\$ _____	+ \$ _____ =	\$ _____
Add lines 1-4 above. Total household income =			\$ _____
5 Less deductions for 2018 child care expenses	- \$ _____	- \$ _____ =	- \$ _____
6 Less 2018 alimony or maintenance paid	- \$ _____	- \$ _____ =	- \$ _____
Use this total to refer to the chart on page 1 for Bursary Assisted Parental Contribution			Total Net Income: (subtract lines 5 & 6 from total household income) = \$ _____

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Only complete the table below if **you have not completed your 2018 income tax return**. Once this table is completed, place the total value in Table A (line 2) above.

TABLE B			
	Parent/Guardian	Parent/Guardian	Total
1 Employment Income from all 2018 T4 statements (box 14), T4A, T4E & T4RSP statements	\$ _____	+ \$ _____ =	\$ _____
2 Trust income from all 2018 T3 statements	\$ _____	+ \$ _____ =	\$ _____
3 Investment income from all 2018 T5 statements	\$ _____	+ \$ _____ =	\$ _____
4 Other income included but not limited to rental income, partnership income, capital gains, workers compensation benefits, scholarships, severance pay, etc.	\$ _____	+ \$ _____ =	\$ _____
5 Net income from self-employment	\$ _____	+ \$ _____ =	\$ _____
6 Universal Child Care Benefit from 2018 RC62 statements	\$ _____	+ \$ _____ =	\$ _____
Total to place on line 2 of Table A above	\$ _____	\$ _____	Total = \$ _____

Only complete the table below if you lived in Canada for less than 12 months in 2018.

EXAMPLE OF TABLE C			
	Parent/Guardian		
1 Total income earned in Canada in 2018	\$12,000	\$9,000	
2 Number of months working in Canada in 2018	3 Months	3 Months	
3 Calculate average monthly salary: total income (line 1) divided by number of months (line 2)	\$4,000 Monthly	\$3,000 Monthly	
4 Calculate annualized income: take monthly salary (line 3) and multiply by 12 months	\$48000	+ \$36000 =	Total Household Income
5 Less deduction for 2018 child care expenses	- \$1720	\$0	- \$1720
6 Less 2018 alimony or maintenance paid	\$0	\$0	\$0
<h2 style="margin: 0;">EXAMPLE</h2>	Use this total to refer to the chart on page 1 for Bursary Assisted Parental Contribution		Total Net Income: <i>(subtract lines 5 & 6 from total household income)</i>
	----->		= \$82,280

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TABLE C			
	Parent/Guardian	Parent/Guardian	
1 Total income earned in Canada in 2018	\$ _____	\$ _____	
2 Number of months working in Canada in 2018	_____ Months	_____ Months	
3 Calculate average monthly salary: total income (line 1) divided by number of months (line 2)	\$ _____ Monthly	\$ _____ Monthly	
4 Calculate annualized income: take monthly salary (line 3) and multiply by 12 months	X12 Months \$ _____ +	X12 Months \$ _____ =	Total Household Income
5 Less deduction for 2018 child care expenses	-\$ _____	-\$ _____ =	-\$ _____
6 Less 2018 alimony or maintenance paid	-\$ _____	-\$ _____ =	-\$ _____
		Use this total to refer to the chart on page 1 for Bursary Assisted Parental Contribution ----->	Total Net Income: (subtract lines 5 & 6 from total household income) = \$ _____

OTHER SOURCES OF INCOME
<p>1 Does either parent/guardian directly or indirectly own shares in a private corporation or professional corporation (e.g. law corporation, medical corporation) over which either parent/guardian controls, in any manner, the distribution of the corporation's income to its shareholders or the amount of compensation the corporation pays to either parent/guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2 If the answer to question 1 above is Yes, did the corporation earn income in 2018 which was not fully paid/distributed to one of the parents/guardians and disclosed in the applicable chart above? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how much: \$ _____</p> <p>3 Did either parent/guardian, or any of your child(ren), receive distributions from a Trust in 2018 which is not disclosed in the applicable chart above? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how much: \$ _____, received by: _____</p> <p>4 In 2018 did either parent/guardian receive any stipends, allowances or financial assistance of any kind, whether reportable or not for tax purposes, which are not fully disclosed in the applicable chart above? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how much: \$ _____</p>

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VALUE OF ASSETS																			
Home Address	City	Postal Code																	
<p>Check one: <input type="checkbox"/> Rent <input type="checkbox"/> Own</p> <p>If you own:</p> <p>Balance of outstanding mortgage = \$ _____</p> <p>Assessed value of property as per City of Winnipeg property assessment = \$ _____ (or find at www.winnipegassessment.com/asmttax/english/propertydetails/)</p> <p>Other owned real estate property:</p> <p>Do you own or have partial ownership in other real estate? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes: <input type="checkbox"/> Own Fully <input type="checkbox"/> _____% Ownership</p>																			
Address	City/Town	Postal Code																	
<p>Balance of outstanding mortgage = \$ _____</p> <p>Assessed value of property as per property assessment = \$ _____</p>																			
<p>Household Cars and Recreational Vehicles</p> <p>Make/Model: _____ Year: _____ Estimated Value of Vehicle: \$ _____</p> <p><i>Check one:</i> <input type="checkbox"/> Lease <input type="checkbox"/> Own - If own, outstanding loan = \$ _____</p> <p>Make/Model: _____ Year: _____ Estimated Value of Vehicle: \$ _____</p> <p><i>Check one:</i> <input type="checkbox"/> Lease <input type="checkbox"/> Own - If own, outstanding loan = \$ _____</p> <p>Make/Model: _____ Year: _____ Estimated Value of Vehicle: \$ _____</p> <p><i>Check one:</i> <input type="checkbox"/> Lease <input type="checkbox"/> Own - If own, outstanding loan = \$ _____</p>																			
<p>Business Assets</p> <p>Do you own or have partial interest in a business or company? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Own Fully <input type="checkbox"/> _____% Ownership</p> <p>If yes, please list and attach the latest set of financial statements available.</p>																			
Name of Business or Company		Address																	
<p>Other Assets</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Savings</td> <td style="width: 25%;">\$ _____</td> <td style="width: 25%;">Bonds</td> <td style="width: 25%;">\$ _____</td> </tr> <tr> <td>Investment Accounts</td> <td>\$ _____</td> <td>Securities</td> <td>\$ _____</td> </tr> <tr> <td>GICs</td> <td>\$ _____</td> <td>Trust & Inheritance</td> <td>\$ _____</td> </tr> <tr> <td>Stocks</td> <td>\$ _____</td> <td>Other Assets over \$5000</td> <td>\$ _____</td> </tr> </table>				Savings	\$ _____	Bonds	\$ _____	Investment Accounts	\$ _____	Securities	\$ _____	GICs	\$ _____	Trust & Inheritance	\$ _____	Stocks	\$ _____	Other Assets over \$5000	\$ _____
Savings	\$ _____	Bonds	\$ _____																
Investment Accounts	\$ _____	Securities	\$ _____																
GICs	\$ _____	Trust & Inheritance	\$ _____																
Stocks	\$ _____	Other Assets over \$5000	\$ _____																

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EXPENSE INFORMATION	
<i>Please calculate annual expenses from 2018 below. Place a value of \$0 to those lines that do not apply.</i>	
Expenditures	Annual 2018
Mortgage Payments for All Owned Properties	\$ _____
Property Taxes for All Owned Properties	\$ _____
Rent	\$ _____
Loan(s) (purpose _____)	\$ _____
Car Lease (s)	\$ _____
Utilities (gas, hydro, phone, cable, internet)	\$ _____
Insurance (home, car, life)	\$ _____
Registered Savings Plan Contributions	\$ _____
Cost of Vacations	\$ _____
Child Care Expenses	\$ _____
Memberships	\$ _____
Classes/Activities (dance, swimming, hockey, etc.)	\$ _____
Summer Camp	\$ _____
Synagogue Membership	\$ _____
Medical/Dental Expenses	\$ _____
Household University/College Tuition Paid	\$ _____
Other - Please list	\$ _____
Other - Please list	\$ _____
Total = \$	_____

We/I hereby certify that the above information is true, correct, and complete in every respect

We/I understand that misrepresentation or non-disclosure may void any agreed bursary assistance and that we/I may be required to provide additional information and/or supporting documents for this application to be considered by the Assessment Committee. This application will be cancelled and/or any bursary withdrawn if any relevant information has been withheld, or is misleading in any way. Should circumstances change during the 2019-20 school year and we/I no longer need additional bursary assistance, we/I acknowledge that we/I must immediately report this to the Finance Department. We/I understand that the Parental Contribution will be adjusted accordingly from that point forward (making bursary assistance available to help other families in need).

*Signature of parent/guardian:	Date:
*Signature of parent/guardian:	Date:

*Both parents/guardians need to sign this form, either on the same form or in counterparts.