



Application for Waiver of Fees 2024-2025

PLEASE READ BOTH SIDES PRIOR TO FILLING OUT THIS FORM.

Complete Section A and either Section B or Section C.

- Waiver covers: basic school fees (materials, resources), junior high option course fee, basic field trip fee, lunch supervision fee.
- Waiver does NOT cover: optional field trips (e.g. adventure trips), yearbook, extra-curricular activities, other misc. charges, Alberta non-resident and International student fees.
- 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.

SECTION A: PARENT/GUARDIAN			
Last Name:		First Name:	
Street Address		City	Postal Code
Home	Cell Phone	Email Address	
Number of people residing in household:	# of adults	# of children	
Name(s) of Child(ren) (include all)		School(s) Attending	

SECTION B: CONFIDENTIAL FINANCIAL INFORMATION: Please choose one of the following:

I have attached a copy of a **2023 OPTION C PRINT** for ALL adults in the household. An Option C Print may be obtained at no charge by calling Revenue Canada at **1-800-267-6999**, or by visiting <https://www.canada.ca/en/revenue-agency/services/e-services/e-services-individuals/a-proof-income-statement-option-print.html>. **PLEASE DO NOT SEND NOTICE OF ASSESSMENT.**

I have attached a copy of a current Alberta Health Benefit Card showing applicant's and student name(s).

SECTION C: EXCEPTIONAL CIRCUMSTANCES – Please refer to information on the back of this form

My circumstances are exceptional and I have provided the necessary documents as outlined on the back of this form.

EXCEPTIONAL CIRCUMSTANCES

Check Section C on front if there are exceptional circumstances that are affecting your ability to pay your fee(s). In order to be considered exceptional circumstances all of the following criteria must be met:

1. Provide a detailed letter explaining your circumstances.
2. Attach supporting documents for all adults 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.
3. Final decision rests with the Secretary-Treasurer.
4. Appeals may be made to the Superintendent.

The following chart of family income levels (before taxes) will be used to determine the waiver of fees for the 2024-2025 school year.

# of Adults and Children Per Household	100% of fees waived	50% of fees waived
2 persons	<\$33,639	\$33,640 - \$44,740
3 persons	<\$41,356	\$41,357-\$55,003
4 persons	<\$50,212	\$50,213 - \$66,782
5 persons	<\$56,950	\$56,951 - \$75,743
6 persons	<\$64,230	\$64,231 - \$85,426
7 or more persons	<71,511	\$71,512 - \$95,110

Data Source Used to Influence These Figures: <https://www.canada.ca/en/immigration-refugees-citizenship/services/application/application-forms-guides/guide-5482-instruction-fill-financial-evaluation-form-1283.html>

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

Secretary-Treasurer
New Horizons Charter School Society
1000 Strathcona Drive
Sherwood Park, Alberta T8A 3R6

Mark "CONFIDENTIAL" on the envelope

You are responsible for your school fees until you have received notification from our office that your waiver request has been approved. It is our goal to process your fee waiver within three weeks of the receipt date. If you have submitted a fee waiver and have not heard back within three weeks, please contact our office at (780) 416-2353.

I certify 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.

Applicant Signature

Date