



**FINANCIAL INFORMATION**

**Monthly Expenses** (for you, or for yourself and your partner)

Copies of all bills (if they are outstanding), eviction notice, disconnection notice and an explanation if a bill is unusually high must be provided or your claim cannot be processed. **PLEASE BE ADVISED THAT THIS INFORMATION IS NECESSARY FOR THE COMMITTEE TO MAKE AN INFORMED DECISION.**

	Usual Monthly Payment	Amount in Arrears
Mortgage/Rent (Name and address of landlord/mortgage lender)		
Property Taxes		
Utilities - Water		
Utilities - Natural Gas		
Utilities - Power		
Food		
Daycare/Elder Care (Name and address of provider)		
(Employee Shared) Health Care Benefits Premium		
Prescription Medical (not covered)		
Telephone/cell - if a necessity, please explain		
Cable/Internet		
Vehicle Loan/Lease/Expenses		
Loans/Credit Cards		
Other		
<b>TOTAL</b>		

**Monthly Income**

We require you to provide the total monthly income and hours worked for you and all members of your family for the last three months. Please indicate if income is through STDI, LTDI, pension or insurance.

	Current Month (mm/dd/yyyy)		Last Month (mm/dd/yyyy)		Next Month (mm/dd/yyyy)	
	Income	Hours	Income	Hours	Income	Hours
(Take Home Pay) Applicant						
(Take Home Pay) Partner						
(Take Home Pay) Other Family						
Second Job(s)						
Rent or Room/Board Received						
Child Support/Alimony Received						
GST Rebate						
Child Tax Credit/ Universal Child Care Benefit						
<b>TOTAL INCOME MONTHLY</b>						

**FINANCIAL INFORMATION**

**Assets** (belonging to you, or to yourself and your partner)

In completing the financial information section, please provide detailed information about the value of your assets. The committee reviews assets to determine if there is enough income and/or value to cover basic necessities such as food, shelter and utilities.

Cash on Hand	Cash in Bank Acct's	RRSPs	Bonds	Mutual Funds/Stocks	Other Investments

Vehicles - including recreation vehicles

	Current Value	Amount Owing
House		
Other Property		
Misc.		

Make	Year	Current Value	Amount Owing

**REQUEST FOR ASSISTANCE**

Fund is for BASIC NEEDS. Fund is NOT available to provide assistance for ongoing needs or for personal loans, lines of credit, credit cards, legal fees or for dental work.

Detailed explanation for financial assistance **MUST BE PROVIDED**. If more room is required please use additional sheet.

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**Amount Requested and for? (eg. rent \$500 and food \$200)**

Amount: _____	Amount: _____
Amount: _____	Amount: _____
Amount: _____	Amount: _____
Amount: _____	Amount: _____

**CHECKLIST**

**Note:** if any of the noted items are not included this application will be returned, delayed or denied.

- Utilities Bills
- Daycare/Eldercare Bills
- Proof of Rent or Mortgage in Arrears
- Health Care Benefits Premium Bill/Invoice
- Other \_\_\_\_\_

**\*DO NOT SEND:** Bills for phone, internet, cable, credit card, vehicle expenses and loans (unless deemed necessary)

**VERIFICATION**

By signing below I verify the information provided in this application is true and accurate and I understand that missing/inaccurate information may delay or result in the denial of my application. I authorize the Members' Benefits Committee to verify any information provided. All applications are subject to the Members' Benefits Committee by-laws. **This form must be signed by the applicant and faxed to 780-930-3344 or mailed to AUPE Headquarters (Solidarity Place), 10451-170 Street NW, Edmonton, AB, T5P 4S7.**

**Disclaimer and Verification:**

By signing this section, you acknowledge that all information submitted to the Members' Benefits Committee will only be used to determine eligibility and distribution of the fund, you verify that all information included in the application is accurate, and you understand that any missing information may result in delay or denial of the application.

Applicant's Signature	Date (mm/dd/yyyy)
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## GUIDE TO FILLING OUT THE APPLICATION

Please print legibly and complete all areas of the application in order to avoid delays or denied.

### PERSONAL INFORMATION

1. Provide name, current address, home and work phone number.
2. If you know your AUPE Member Number, please fill in the blank, if possible. Indicate what local and chapter you belong to and the approximate date you became an AUPE member.
3. Indicate how many children you have living with you and their ages.
4. Fill in occupation, work status and your employer. If you have more than one occupation and/or employer, please list all.
5. Please indicate your marital status. If you have a partner, please provide your partner's name, birth date and employment information. If they have more than one occupation and/or employer, please list all.

### FINANCIAL INFORMATION – Monthly Expenses (Applicant and Partner, if applicable)

1. All monthly expenses must be listed with the normal monthly bill or minimum payment required and the outstanding/arrears amount. All expenses should have corresponding copies of current bills attached.
2. Other amounts could include (but are not limited to) alimony, child support, work tools/clothes or transportation (such as bus or LRT if you do not own a car).
3. The Members' Benefits Committee pays directly to a landlord or service provider. Information on service provider should be included with application. The only exception is for food where you will be sent food vouchers.

### FINANCIAL INFORMATION – Monthly Income and Assets (Applicant and Partner, if applicable)

1. All sources of income must be listed with last month's income, the current month of income and the estimate of next month's income. Income also includes amounts received for social assistance, employment insurance, sick benefits, Canada pension, workers' compensation, disability and/or alimony. Include a copy of all pay/cheque stubs for both the last month and the current month.
2. If you have applied for assistance of any kind but have not begun receiving it (social assistance, employment insurance, sick benefits, Canada pension, workers' compensation, disability and/or alimony), please indicate the date applied.
3. List all assets that are in your possession, including cash and investments (such as RRSPs, RESPs, bonds, stocks or treasury bills); property; vehicles and any other asset of value. Miscellaneous items could include antiques, collectibles, jewelry and other items that could be sold as an asset.

### REQUEST FOR ASSISTANCE

1. It is important for you to provide an explanation as to why you are in a situation where you require assistance. Explain the steps you have taken to reduce your debt load; provide a list of the different sources you have contacted in order to gain assistance; indicate how long you anticipate it will be before your financial situation changes; and what you will do if you do not receive assistance.