Indian and Northern Affairs Canada   Affaires indiennes et du Nord Canada

SOCIAL ASSISTANCE MONTHLY RENEWAL DECLARATION

If you require continued Social Assistance, please complete this form and return to your local administering Authority at least 2 weeks before the next cheque issue.

1**. Are you still in need of Social Assistance?**   ☐ Yes   ☐ No

2**. Has your marital / employment situation changed?**   ☐ Yes   ☐ No

If yes, explain change _____

3**. List any changes in your living situation (e.g. address, rent, etc.). Submit new receipts**.

_____

_____

Canada

This monthly declaration is necessary to determine your eligibility for the following month's income assistance benefits. If you do not submit the declaration or it is late, a cheque may not be printed. Please include, job search, rent receipts, pay stubs, EI documents and any other requesting or required documentation with this document.

4**. Have you had any earned or unearned Income this month?**   5**. Has there been any change in your assets**?

Yes ☐   No ☐   If yes, complete ☐ Yes   ☐ No

If yes, complete

Income	
➤ Earnings	$
➤ Family Allowance	$
➤ Maintenance	$
➤ Unemployment Insurance	$
➤ Total	$

Assets	
➤ Bank Account	$
➤ Property	$
➤ Other (specify)	$
➤ Total	$

6. **Is there any change in your number of dependents or their school status?**   ☐ Yes   ☐ No

If yes, explain the change(s) _____

_____

I declare that this is a true statement concerning my monthly income, assets, marital, employment, and family status. I give permission for this information to be verified and I consent to a report being obtained from any reporting agency for that purpose.

Band Name	Status #	Signature	Date

PLEASE PRINT YOUR NAME HERE:

MONTHLY DECLARATIONS, JOB SEARCHES and any other documentation must be

dropped off at the Health Centre by the 20th of each month.