



## Canada Education Savings Grant Application

### Declaration and Consent – Subscriber

This form is to be used when applying for the Canada Education Savings Grant. It must be signed by the Subscriber (person who opens a RESP, names one or more beneficiaries, and deposits money into the RESP).

<b>Subscriber (Individual or Agency)</b>	Last Name: or Name of Agency:
	First Name: or Name of Representative of Agency:
<b>Joint Subscriber</b>	Last Name:
	First Name:
<b>Beneficiary</b>	Last Name:
	First Name:

<b>RESP</b>	Specimen Plan Number:		Contract Number:	
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**Read this document carefully.** For information regarding the Canada Education Savings Grant, please ask your Promoter.

#### Explanation of Key Words

**Beneficiary** – Beneficiary means the individual (usually a child) who will receive the money to help pay for his or her post-secondary education (college, university, or trade school), if they qualify under the terms of the Registered Education Savings Plan (RESP). The money received from the RESP is known as the Educational Assistance Payment.

**Custodial Parent or Legal Guardian** – A Custodial Parent or Legal Guardian is an individual, department, agency, or institution that has the legal right to make decisions affecting a child's interests, and the responsibility of taking care of the child.

**Promoter** – The Promoter can be any person or organization offering a Registered Education Savings Plan to the public, and who will open a RESP for the Subscriber.

**Subscriber** – The Subscriber is the person or Child Care Agency who opens a RESP with the Promoter. The Subscriber names one or more beneficiaries and may deposit money into the RESP. These deposits are called contributions.

**Trustee** – The Trustee is the financial organization that takes care of the money in the RESP for the Beneficiary. The Trustee invests, administers and distributes the money.

**NOTE: These explanations are provided for your information only. In the event of a discrepancy, the legal definitions found in the *Canada Education Savings Act* shall prevail.**

#### Your Privacy Rights

Human Resources and Skills Development Canada protects the confidentiality of your personal information. We cannot give your personal information to any person or organization without your written consent, except where authorized by legislation. You (or your authorized representative) have the right to request a copy of the information in your file.

The personal information about you and the other information included on this form will be kept in Personal Information Bank "HRSDC PPU 506" of Human Resources and Skills Development Canada.

Instructions for making a formal request are available in *Info Source*. You can get a printed copy of *Info Source* at Human Resources Centres of Canada or by calling 1 800 O-Canada (1 800 622-6232). You may also view the information electronically on the web at [www.infosource.gc.ca](http://www.infosource.gc.ca).

Call us or visit our Internet site if you need more information about the Canada Education Savings Program:

**By phone**

- 1 888 276-3624
- 1 800 465-7735 for TTY users only

**By e-mail**

- [cesp-pcee@hrsdc-rhdcc.gc.ca](mailto:cesp-pcee@hrsdc-rhdcc.gc.ca)

**Internet**

- [www.hrsdc-rhdcc.gc.ca](http://www.hrsdc-rhdcc.gc.ca)



# Canada Education Savings Grant Application

## Declaration and Consent – Subscriber

### When completing this part, make sure that you:

1. Check off the appropriate box at the bottom of this page, sign, and date the declaration;
2. Make a photocopy for your records; and
3. Return the original to the Promoter: \_\_\_\_\_  
(Promoter Name and Address)

### By signing below, I:

1. Request that the Trustee apply for the Canada Education Savings Grant in respect of the Beneficiary.
2. Understand that for the Canada Education Savings Grant to be paid, the Beneficiary must be a Canadian resident at the time of any contributions to the RESP.
3. Agree to inform the Trustee if, at any time, there is any change in the Beneficiary's circumstances.
4. Understand that if the Beneficiary is 16 or 17, at least one of the following must have occurred in order to be eligible for the Canada Education Savings Grant:
  - In any four years before the end of the year in which the Beneficiary turned 15, a total of at least \$100 per year must have been contributed to one or more RESPs in respect of the Beneficiary, and not withdrawn; or
  - a total of at least \$2,000 must have been contributed to one or more RESPs in respect of the Beneficiary before the end of the year in which the Beneficiary turns 15, and not withdrawn.
5. Understand that the authority to collect, use, and share personal information and other information included on this form for the purposes described below is provided under the *Canada Education Savings Act*, the *Income Tax Act* and the *Privacy Act*. Once under the control of Human Resources and Skills Development Canada, that information is administered in accordance with the *Canada Education Savings Act* and the *Privacy Act*. Once under the control of Canada Customs and Revenue Agency, that information is administered in accordance with the *Income Tax Act* and the *Privacy Act*.
6. Understand that Human Resources and Skills Development Canada will use the personal information about me and the other information included on this form for policy analysis and research, and will share that information with Human Resources Development Canada to administer and evaluate the Canada Education Savings Program:
  - my name;
  - RESP contract information (the Promoter's name and Business Number, the plan name and identification number, the contract identification number and date created);
  - RESP transaction information (the Promoter's transaction identifier, transaction date and type, and the date sent to the Canada Education Savings Program);
  - contribution amounts; and
  - total RESP assets.
7. Understand that the following information will be shared with and used by the Promoter, Trustee, and Canada Customs and Revenue Agency for income tax purposes:
  - my name; and
  - information about the RESP contract (the Promoter's name and Business Number, the plan name and identification number, contract identification number, and date created).
8. Understand that my name will be shared with the Beneficiary. If the Beneficiary is under the age of 19 and ordinarily resides with a Custodial Parent or Legal Guardian, my name will be shared with that Custodial Parent or Legal Guardian.
9. Confirm that I have read and understood this document. I also understand that the *Privacy Act* gives me (or my authorized representative) the right to access my personal information kept in my government file.

- I consent to the use and sharing of my personal information as mentioned above.
- I do not consent to the use and sharing of my personal information as mentioned above.

**NOTE:** I understand that I am not required to give my consent; however, if I do not, Human Resources and Skills Development Canada cannot pay the Canada Education Savings Grant to the Trustee in respect of the RESP Beneficiary.

\_\_\_\_\_  
Subscriber's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Joint Subscriber's Signature (if applicable)

\_\_\_\_\_  
Date





## Canada Education Savings Grant Application

### Declaration and Consent – Custodial Parent or Legal Guardian

This form is to be used when applying for the Canada Education Savings Grant. It must be signed by the Custodial Parent or Legal Guardian (individual or department, agency, or institution that has the responsibility of taking care of the child).

<b>Custodial Parent or Legal Guardian</b>	Last Name:		
	First Name:		
<b>Beneficiary</b>	Last Name:		
	First Name:	S.I.N.: <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>	
	Date of Birth:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Year	<input type="text"/> <input type="text"/> <input type="text"/> Month
		Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	

<b>RESP</b>	Specimen Plan Number:	Contract Number:
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**Read this document carefully.** For information regarding the Canada Education Savings Grant, please ask the Promoter.

#### Explanation of Key Words

**Beneficiary** – Beneficiary means the individual (usually a child) who will receive the money to help pay for his or her post-secondary education (college, university, or trade school), if they qualify under the terms of the Registered Education Savings Plan (RESP). The money received from the RESP is known as the Educational Assistance Payment.

**Custodial Parent or Legal Guardian** – A Custodial Parent or Legal Guardian is an individual, department, agency, or institution that has the legal right to make decisions affecting a child's interests, and the responsibility of taking care of the child.

**Promoter** – The Promoter can be any person or organization offering a Registered Education Savings Plan to the public, and who will open a RESP for the Subscriber.

**Subscriber** – The Subscriber is the person or Child Care Agency who opens a RESP with the Promoter. The Subscriber names one or more beneficiaries and may deposit money into the RESP. These deposits are called contributions.

**Trustee** – The Trustee is the financial organization that takes care of the money in the RESP for the Beneficiary. The Trustee invests, administers and distributes the money.

**NOTE: These explanations are provided for your information only. In the event of a discrepancy, the legal definitions found in the *Canada Education Savings Act* shall prevail.**

#### Your Privacy Rights

Human Resources and Skills Development Canada protects the confidentiality of your personal information. We cannot give your personal information to any person or organization without your written consent, except where authorized by legislation. You (or your authorized representative) have the right to request a copy of the information in your file.

The personal information about you and the other information included on this form will be kept in:

- Personal Information Bank "HRSDC PPU 506" of Human Resources and Skills Development Canada;
- Personal Information Bank "SDC PPU 390" of Human Resources Development Canada.

Instructions for making a formal request are available in *Info Source*. You can get a printed copy of *Info Source* at Human Resources Centres of Canada or by calling 1 800 O-Canada (1 800 622-6232). You may also view the information electronically on the web at [www.infosource.gc.ca](http://www.infosource.gc.ca).

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**Internet**

- [www.hrsdc-rhdcc.gc.ca](http://www.hrsdc-rhdcc.gc.ca)



# Canada Education Savings Grant Application

## Declaration and Consent – Custodial Parent or Legal Guardian

### When completing this part, make sure that you:

1. Check off the appropriate box at the bottom of this page, sign, and date the declaration;
2. Make a photocopy for your records; and
3. Return the original to the Promoter: \_\_\_\_\_  
(Promoter Name and Address)

### By signing below, I:

1. Confirm that I am the Custodial Parent or Legal Guardian of the Beneficiary or I am the Beneficiary and am aged 18 or older.
2. Understand that the Subscriber intends to open a RESP with the Promoter that will have the Promoter pay or cause to be paid Educational Assistance Payments out of the RESP for the Beneficiary.
3. Understand that the Subscriber has requested that a payment of the Canada Education Savings Grant be paid into a RESP in respect of the Beneficiary.
4. Understand that the authority to collect, use, and share personal information and other information included on this form for the purposes described below is provided under the *Canada Education Savings Act*, the *Income Tax Act* and the *Privacy Act*. Once under the control of Human Resources and Skills Development Canada, that information is administered in accordance with the *Canada Education Savings Act* and the *Privacy Act*. Once under the control of Canada Customs and Revenue Agency, that information is administered in accordance with the *Income Tax Act* and the *Privacy Act*.
5. Understand that the following information may be used by and shared with Human Resources and Skills Development Canada, Human Resources Development Canada, Canada Customs and Revenue Agency, the Promoter, and the Trustee to administer the Canada Education Savings Program and to conduct policy analysis, research and program evaluation:
  - personal information about the Beneficiary (name, date of birth, gender, Social Insurance Number);
  - post-secondary education information (the academic year, length and start date, program length, type and year, and the educational institution's postal code); and
  - information about Educational Assistance Payments from the RESP.
6. Understand that personal information about the Beneficiary (name, date of birth, Social Insurance Number, amount of Educational Assistance Payments from the RESP) will also be shared with and used by the following:
  - the Promoter for the purpose of having Educational Assistance Payments paid out of the RESP for the Beneficiary; and
  - Canada Customs and Revenue Agency for purposes of policy analysis, research and compliance with the *Income Tax Act*.
7. Confirm that I have read and understood this document. I also understand that the *Privacy Act* gives me (or my authorized representative) the right to access my personal information kept in my government file.

I consent to the use and sharing of the Beneficiary's personal information as mentioned above.

I do not consent to the use and sharing of the Beneficiary's personal information as mentioned above.

**NOTE:** I understand that I am not required to give my consent; however, if I do not, Human Resources and Skills Development Canada cannot pay the Canada Education Savings Grant to the Trustee in respect of the RESP Beneficiary.

\_\_\_\_\_  
Signature of the Custodial Parent or Legal Guardian,  
or Beneficiary aged 18 or older

\_\_\_\_\_  
Date