



BLACKFALDS FCSS
TOWN OF BLACKFALDS
Box 220, 5016 Waghorn Street
Blackfalds, AB TOM OJO
P: 403.885.6247
F: 403.885.0011
www.blackfalds.com/FCSS

SUBSIDIZED PROGRAM APPLICATION

Section 1: Subsidy programs you can access

Thank you for your interest in The Town of Blackfalds Subsidy Programs. This is the only application you need to fill out to have your income assessed for the programs listed below. Some programs may contact you for further details. All applicants must be a resident of Blackfalds. Once approved you must show proof of identity and Blackfalds residency, along with your approval notice, before you can access any of the subsidy programs or services.

One Application - Four Programs

Based on your income, The Town subsidy programs you may be eligible for by completing this application are:

Please check off those you are interested in:

1. LAP Leisure Access Program Subsidy

Recreation Fee Assistance Program - The Town of Blackfalds will subsidize, when possible, fees for individuals and seniors who are unable to pay for municipally operated programs, memberships and admissions that would contribute to their personal growth and community involvement. Through this program the quality of life and well-being of Blackfalds residents will be greatly improved; creating a strong and healthy community.

Please note LAP funds will be administered & held at the Guest Services Counter at the Abbey Centre.

2. Tools for School

The Back to School Program - Committed to ensuring every student in our community has access to the supplies needed to reach their full academic potential. This is done by providing backpacks filled with school supplies for Blackfalds students in Kindergarten through Grade 12.

3. Winter Wear Program

Winter Coats and Boots program - With local sponsorships FCSS is able to ensure children 0 to 18 are provided with the necessary winter wear to ensure every child in our community with low-income hurdles remove barriers that keep them from staying warm in the winter.

4. The Christmas Bureau Program

The Christmas Bureau Program - A collaborative community effort symbolizing our community's willingness to help low-income Blackfalds families and residents celebrate and enjoy the holidays through the distribution of Christmas hampers.

When this application is processed by FCSS, your income will be assessed to determine if you meet the income requirement for these four programs. You will receive notification telling you if you qualify for these programs based on your income. This notification will tell you what to do next.



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Section 2: How to apply

Step 1. Read all pages carefully.

Step 2. Complete this application to the best of your ability. If your application is incomplete, not clearly printed or missing documents, the application process will take longer.

Step 3. Provide current proof of income information for your household with your application:
Section 4.

Step 4. Drop off or send your **completed application and proof of income document** to FCSS. The contact information listed at the top of this page. If you are applying by mail, send copies of income documents – do not send original documents by mail.

Step 5. In two to four weeks from the time your application is received, you will receive notification telling you if you qualify for these programs.

Once the time-period you have been approved for ends, you must re-apply with all documents.

Section 3: What income proof do you need?

Please submit a copy of **ONE** of these documents with your application. Please check which document you are submitting. A copy of the document **MUST** accompany your application. The total household income must be less than the Low Income Cut-Off (LICO) set by Statistics Canada and is updated annually.

- Canada Revenue Agency: Notice of Assessment – you must present a current “Notice of Assessment” or “Notice of Reassessment” for each family member 18 years and over that lives with you at your Blackfalds residential address. Total income before tax is shown on line 150 of your “Notice of Assessment” or “Notice of Reassessment”. A tax return summary is not accepted. For more information on your Notice of Assessment you go online and login to your account to view and immediately print your Notice of Assessment. If you are not signed up for the Canadian Revenue Agency’s ‘My Account’, you can register now at www.cra.gc.ca/myaccount.
- Assured Income for Severely Handicapped benefits (AISH) - A copy of your current Health Benefits Card (that has not expired)
- Alberta Works: Income Subsidy/Support (Supports for Independence) – A copy of your current Health Benefits Card (that has not expired)
- Letter from a Registered Social Worker – Only when no other documents are available. A letter (on letterhead) dated within the previous 30 days from an Alberta Registered Social Worker with whom a current relationship exists. The letter should outline the length of the relationship and state the family income.
- Resettlement Assistance Program form – a copy of the Start-Up & Monthly Allowance that confirms you are receiving support under the Resettlement Assistance Program
- For independent youth: a letter from school principal or guidance counselor, or letter from Child and Youth Support Program of Alberta Children’s Services



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Section 4: Applicant information

All applicants must complete this section.

A. APPLICANT

First Name		Last Name	
Address		City	Postal Code
Phone ()		Email Address	
Date of Birth YYYY / MM / DD	Gender	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Common Law <input type="checkbox"/> Separated/ Divorced <input type="checkbox"/> Widowed	

B. ADDITIONAL FAMILY INFORMATION

FIRST NAME	LAST NAME	RELATIONSHIP	GENDER	DATE OF BIRTH (YYYY/MM/DD)	ALBERTA HEALTH CARE NUMBER

C. TOTAL NUMBER IN HOUSEHOLD: ALL PERSONS LIVING IN THE SAME DWELLING AND RELATED BY BLOOD, MARRIAGE, COMMON-LAW RELATIONSHIP OR ADOPTION

Why are we asking this? Please see next page for the answers to frequently asked questions.

NUMBER OF ADULTS (18 & over, related by blood, marriage, common-law relationship)	+	NUMBER OF CHILDREN (under 18 related by blood or adoption)	=	TOTAL NUMBER IN HOUSEHOLD



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Section 8: Consent and Statement of Applicant

I _____ declare that:
Applicant Name (please print)

1. I am the main applicant and it is my responsibility to inform all members of my household family about the program and conditions of use.
 2. I give Blackfalds FCSS my permission to check the information within this application.
 3. I provide Blackfalds FCSS permission to share information within this application between The Town of Blackfalds subsidy programs for the purpose of assessing my application.
 4. The Town of Blackfalds FCSS may contact me in matters pertaining to this application.
 5. The information I have provided for this application is true.
 6. If you or anyone in your household, has a change in your circumstances (i.e. change of address, new job etc.) you must notify Blackfalds FCSS immediately. Changes may impact program eligibility.
 7. Misuse of program privileges or misinformation provided on this application may result in a loss of privileges or penalty.
- I would like to receive information on other free or low-cost programs offered by The Town of Blackfalds FCSS for which I may be eligible.

(Applicant or Guardian Signature)

Date (YYYY / MM / DD)

Section 9: Right to Refuse Service

Please be advised that Blackfalds FCSS approval of this application is to be at the sole discretion of the Blackfalds FCSS. Blackfalds FCSS retains the right to refuse service to applicants at its sole discretion based on information that is provided or becomes aware of through the application process, or as otherwise brought to its attention. Blackfalds FCSS will exercise its discretion in a reasonable manner, however will exercise its discretion to ensure that the reputation and good standing of the Blackfalds FCSS is upheld at all times.



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ANSWERS TO FREQUENTLY ASKED QUESTIONS

Why are you asking me about the number of family members in my household?

Family household annual income needs to be below the Statistics Canada Low Income Cut-offs (LICOs) to be approved for the LAP Fund. Statistics Canada uses "the economic family that is, all persons living in the same dwelling and related by blood, marriage, common-law relationships or adoption." Therefore we need to gather the same information from you to be able to do the correct comparison.

I am having difficulty filling out this application form.

Please call the FCSS Manager at (403) 885-6247 for assistance.

Where do I send the application form?

Drop off the completed application (with copies of supporting documents) to the Blackfalds FCSS Office, 5016 Waghorn Street or mail or fax to:

Blackfalds FCSS
Box 220
Blackfalds, AB
TOM OJO
Fax: (403) 885-0011
Email: fcss@blackfalds.com

How long does it take to process my application?

It can take up to 4 weeks to process. You will be notified should you not qualify. Please allow time for mailing. If you have not received anything after a month of submitting your application please contact the FCSS Manager at (403) 885-6247.

What if I'm not approved?

If you have been declined and your financial situation has changed, you are welcome to reapply. There is no waiting period between applications required. Please contact the FCSS Manager at (403) 885-6247 for further information.



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Leisure Access Program (LAP) Fund Eligibility - 2018

To be eligible for LAP funds your family household (include all persons living in the same dwelling and related by blood, marriage, common-law relationship or adoption) annual income needs to be below the Statistics Canada Low Income Cut-offs (LICOs).

Size of family unit	Annual Income	Monthly Income
1 person	\$24,949	\$2,079
2 persons	\$31,061	\$2,588
3 persons	\$38,185	\$3,182
4 persons	\$46,362	\$3,864
5 persons	\$52,583	\$4,382
6 persons	\$59,304	\$4,942
7 persons	\$66,027	\$5,502
More than 7 persons, add \$6,723 per additional person.		

If you qualify you will receive \$100 credit (per family member) for use with municipally operated programs, memberships and admissions.