

DEPENDENT TUITION DATA COLLECTION FORM

In order to meet the ruling by the Revenue Canada Agency please complete the information below when submitting your Dependent Tuition Application Form to Human Resources.

This information will be provided to Payroll Services to issue a T4A to the dependent.

NAME OF DEPENDENT (Print)	
S.I.N. of DEPENDENT	
PERMANENT ADDRESS OF DEPENDENT	Street address, including number:
(Where T4A to be mailed)	City, Province, Postal Code
I am receiving tuition reimbursement from another source: (Please check one)	
NO	
YES (Please source information	tion below)
l am receiving \$	from
I certify that the above informati	on is accurate and can be released to Payroll services
•	on is accurate and can be released to Payroll services
•	•
Signature of Dependent:	•
Signature of Dependent: EMPLOYEE NAME: (Print)	•
Signature of Dependent: EMPLOYEE NAME: (Print) EMPLOYEE DEPARTMENT: PHONE EXTENSION:	•