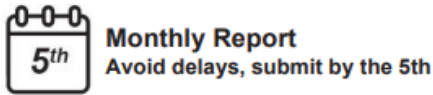


**For Clients**

- The BC Arts Council Grant is considered exempt income. Although this amount will not be deducted from your assistance, you are still required to report it.
- The attached sample monthly report (stub) shows where you will report your BC Arts Council Grant income from the project:
  - **All other income / money received** row – report income amount
  - **Please explain all changes including income and submit proof** section – report “BC Arts Council Grant”
- Please submit a copy of your grant letter and the monthly report (stub) to My Self Serve. Alternatively, you can submit it through the mail or drop it off at a SDPR Ministry office or Service BC. If you require help with submitting your stub, please contact the Ministry office at 1-866-866-0800.



The personal information requested on this form is collected by the Ministry of Social Development and Poverty Reduction pursuant to sections 26(c) of the Freedom of Information and Protection of Privacy Act for the purpose of administering the Employment and Assistance Act and Employment and Assistance for Persons with Disabilities Act. If you have any questions about the collection, use or disclosure of this information, please contact the Ministry of Social Development and Poverty Reduction at 1-866-866-0800.

**1. Since your last declaration:**

Are you still in need of assistance?  Yes  No

Has your family unit received or disposed of any assets?  Yes  No

Any changes to your shelter costs?  Yes  No

Any changes in Dependants or Persons living in the home?  Yes  No

	Applicant	Spouse
Any employment changes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you attending / enrolled in school or training?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you looking for work?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you moved or entered a facility?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Any outstanding warrants for your arrest?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please explain all changes including income and submit proof:

**BC Arts Council Grant**

**2. Declare all income and submit proof. Enter “0” if none.**

	Applicant	Spouse
Net Employment Income	\$	\$
Employment Insurance	\$	\$
Spousal Support / Alimony	\$	\$
Child Support	\$	\$
WorkBC Financial Support	\$	\$
Student Funding (eg: Loans, Bursaries)	\$	\$
Rental Income	\$	\$
Room / Board Income	\$	\$
Worker’s Compensation	\$	\$
Private Pensions (eg: Retirement, Disability)	\$	\$
OAS / GIS	\$	\$
Trust Income	\$	\$
Canada Pension Plan (CPP)	\$	\$
Tax Credits (eg: GST Credit)	\$	\$
Child Tax Benefits	\$	\$
Income Tax Refund	\$	\$
<b>All other income / money received</b>	\$	\$
Income of Dependent Children	\$	/ / / /

**3. Declaration:** I understand that the ministry may disclose this information to verify continuing eligibility for assistance under the above Acts and Regulations. I declare that all of the information provided on this form to the Ministry of Social Development and Poverty Reduction is true and complete.

Applicant Signature	Date (yyyy-mmm-dd)	Spouse Signature	Date (yyyy-mmm-dd)
Applicant Print Name		Spouse Print Name	
Applicant Telephone	Social Insurance Number	Spouse Telephone	Social Insurance Number

**NEXT CHEQUE  
ISSUE**

BENEFIT MONTH    TOTAL ALLOWANCE    SHELTER PORTION    INCOME DECLARED    INCOME DEDUCTED    OTHER DEDUCTIONS    TOTAL CHEQUE