PROVINCE OF BRITISH COLUMBIA

REGULATION/ORDER OF THE MINISTER OF EMPLOYMENT AND INCOME ASSISTANCE

Employment and Assistance Act

Ministerial Order No.

M 310

I, Claude Richmond, Minister of Employment and Income Assistance, order that, effective December 1, 2007, the Forms Regulation, B.C. Reg. 315/2005, is amended by repealing the Application for Income Assistance for Child in the Home of a Relative and substituting the Application for Income Assistance for Child in the Home of a Relative attached to this order.

Minister of Employment and Income Assistance

(This part is for administrative purposes only and is not part of the Order.)

Authority under which Order is made:

Act and section:- Employment and Assistance Act, S.B.C. 2002, c. 40, section 33 (3) (a)

Other (specify):- M224/2005

November 15, 2007 Resub R/321/2007/4

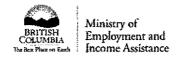


APPLICATION FOR INCOME ASSISTANCE FOR CHILD IN THE HOME OF A RELATIVE

The personal information requested on this form is collected under the authority of section 26(c) of the Freedom of Information and Protection of Privacy Act (FIPPA) and will be used for the purpose of administering the child in the home of a relative income assistance program. The collection, use and disclosure of personal information is subject to the provisions of the FIPPA. Any questions should be directed to the Employment and Assistance Worker receiving the application for income assistance for the child in the home of a relative.

In addition to completing this form, every person listed in Section 3 must complete a Child in the Home of a Relative Screening Consent form, which is required as part of this application.

1. CHILD			
SURNAME	GIVEN NAME		BIRTHDATE (YYYY MMM DD)
CITIZENSHIP/IMMIGRATION STATUS			
CANADIAN LANDED IMMIGRAN	NT SPONSORED	OTHER	
2. RELATIVE CARING FOR CHILD			
SURNAME	GIVEN NAME		SOCIAL INSURANCE NUMBER
ADDRESS	······································		NS 11 - E-1000-00-0-1-1-1-1
MAILING ADDRESS (if different)	* * * ********************************		TELEPHONE
RELATIONSHIP TO THE CHILD	* *************************************		
DO YOU HAVE LEGAL CUSTODY OR GUARDIANSHIP?			
3. PERSONS LIVING IN RELATIVE'S HO			* 107 - 100 TANGETS MATERIAL ST.
S. I CROOKS ESTING IN KEEN STEE STE	NIM.		
List all persons age 18 years or older wh	no live in your home:		
i) NAME	AKA'S, ALIASES		DATE OF BIRTH (YYYY MMM DD)
ii)	The state of the s	THE CONTROL OF THE CO	
ii)			
iv)		***************************************	
v)			
vi)	100 - T-10 AMAGA M- Maria		
vii)			
viii)			
4. RELATIVE'S CONFIRMATION OF CH	IILD'S PLACEMENT		
I agree to accept this child into my home and	d undertake to inform the Ministry	of Employment and	Income Assistance if
CHILD'S NAME	leaves my home or of	any changes conce	rning the information I have provided.
SIGNATURE OF RELATIVE	NAME AND SIGNATURE OF WITNESS		DATE SIGNED (YYYY MMM DD)
5. PARENT(S)			
SURNAME	GIVEN NAME	BIRTHDATE (YYYY MI	MM DD) TELEPHONE ()
ADDRESS			•
AMOUNT OF CONTRIBUTION TO CHILD	The second second		WHO IS THE CUSTODIAL PARENT? BOTH FATHER MOTHER



APPLICATION FOR INCOME ASSISTANCE FOR CHILD IN THE HOME OF A RELATIVE

5. PARENT(S) cont'd			
SURNAME	GIVEN NAME	BIRTHDATE (YYYY MMM DD)	TELEPHONE
			()
ADDRESS			·····
MOUNT OF CONTRIBUTION TO CHILD		WHO	IS THE CUSTODIAL PARENT?
		□ вотн	FATHER MOTHER
PARENT'S CONFIRMATION OF CH	ILD'S PLACEMENT		
FATHER'S / MOTH	ER'S NAME		
THIS IS TO CONFIRM THAT I,			
CHILD'S NAME		CHIŁD'S BI	RTHDATE (YYYY MMM ĐD)
HAVE PLACED MY CHILD		BORN	
RELATIONSHIP		RELATIVE'S NAME	-
IN THE HOME OF MY			
ADDRESS			
AT			4
 			
I FURTHER CONFIRM THAT I AM NOT LIVING	3 WITH THE CHILD AT THE ABOVE	E ADDRESS.	
PARENT'S SIGNATURE	PARENT'S NAME (please print)		DATE SIGNED (YYYY MMM DD)
			l l
PARENT'S ADDRESS			
PARENT'S SIGNATURE (if applicable)	PARENTS NAME (please print)		DATE SIGNED (YYYY MMM DD)
	Section 1		
ARENT'S ADDRESS			
. RESEARCH QUESTION (VOLUNTA	RY)		
WHY WAS THIS CHILD PLACED WITH YOU?			
			•