

**P.S. This form should be used if the subscriber is also Custodial Parent or Legal Guardian and Primary Caregiver.**

For Promoter Use Only

Select the Basic CESG and the Additional CESG and/or the CLB, depending on your situation.

**Subscriber-Only Application for :**  
(Use this form only when the Subscriber is also the Custodial Parent / Legal Guardian and the Primary Caregiver of the Beneficiary)

- Basic Canada Education Savings Grant
- Additional Canada Education Savings Grant
- Canada Learning Bond

Protected "B" When Completed - Personal Information Banks HRSDC PPU 390 and HRSDC PPU 506

**Instructions :**

1. Check above all the incentives you wish to apply for.
2. Read this document carefully. If you have any questions, do not hesitate to ask the Promoter.
3. This form is valid only if completed, signed, dated and given to the Promoter. Do not send directly to HRSDC.
4. Please print clearly. Keep a copy for your records.

Specify the information on the subscriber

**Subscriber**  
(Please see explanation below. Enter name as on your CCTB Notice. No payment can be made if incorrect name is provided)

Last Name	First Name	Middle Name/Initial
Address		Postal Code
Social Insurance Number		
or Name of Agency and Name of Representative		Business Number

If there are two subscribers. Specify the information on the Joint Subscriber.

**Joint Subscriber**  
(If applicable - may be the Subscriber's spouse)

Last Name	First Name	Middle Name/Initial
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Specify the information on the beneficiary (child)

**Beneficiary**  
(Please see explanation below - Enter name as on SIN card)

Last Name	First Name	Middle Name/Initial
Date of Birth	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Social Insurance Number		

Reserved for NBDB use only

**Promoter**  
(This block to be completed by the Promoter)

Name, Address, Postal Code	Telephone
RESP Specimen Plan Number	RESP Contract Number

**Explanation of Key Words \***

**Beneficiary** - Individual who will receive money to help pay for his or her post-secondary education (e.g. college, university, or trade school), if they qualify under the terms of the Registered Education Savings Plan (RESP).

**Custodial Parent or Legal Guardian** - Individual, department, agency or institution that has the responsibility of taking care of the child and the legal right to make decisions affecting the child's interests.

**Primary Caregiver** - Individual who is eligible for the Canada Child Tax Benefit (CCTB) - sometimes called family allowance or baby bonus - and whose name appears on the CCTB payments and annual Notice; or the department, agency or institution that receives the allowance payable under the *Children's Special Allowances Act*.

**Promoter** - Individual or organization offering an RESP to the public and who will open an RESP for the Subscriber.

**Subscriber** - Individual or Child Care Agency who opens an RESP, names one or more Beneficiaries and may deposit money (contributions) for them into the RESP.

**Trustee** - Financial organization that invests, administers and distributes the money in the RESP for the Beneficiary.

**\*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* and the *Income Tax Act* shall prevail.

**Your Privacy Rights**

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

Personal information and other information included on this form will be kept in Personal Information Banks "HRSDC PPU 506" and "HRSDC PPU 390" of Human Resources and Skills Development Canada.

Instructions for obtaining a copy of your personal information can be found 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) or you may view the information at [www.infosource.gc.ca](http://www.infosource.gc.ca).

**Where to get more information about the Canada Education Savings Program:**

Phone: 1 888 276-3663  
1 800 465-7735 for TTY users only  
E-mail: [cesp-pcee@hrsd-rhdsc.gc.ca](mailto:cesp-pcee@hrsd-rhdsc.gc.ca)  
Internet: [www.hrsdc-rhdsc.gc.ca](http://www.hrsdc-rhdsc.gc.ca)

Ce formulaire est disponible en français



**Conditions**

1. In order for the Basic and Additional Canada Education Savings Grant to be paid, the Beneficiary must be resident in Canada at the time of each contribution to the RESP and for a Canada Learning Bond to be paid, the Beneficiary must be resident in Canada immediately before a Canada Learning Bond payment is made.
2. An Additional Canada Education Savings Grant and/or Canada Learning Bond may be paid only if the RESP has one Beneficiary or, if there is more than one, every Beneficiary is a brother or sister of every other Beneficiary.
3. If the Beneficiary is 16 or 17, at least one of the following must have occurred in order for the Beneficiary to be eligible for the Basic and Additional 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.

**Sharing of your Personal Information**

I understand that:

1. The authority of the Government of Canada to collect, share, and use personal information and other information included on this form for the purposes described below is provided under the *Department of Human Resources and Skills Development Act*, the *Canada Education Savings Act* and the *Income Tax Act*. Once under the control of Human Resources and Skills Development Canada, that information is administered in accordance with all applicable laws including the *Canada Education Savings Act*, the *Privacy Act* and the *Department of Human Resources and Skills Development Act*. Once under the control of Canada Revenue Agency, that information is administered in accordance with all applicable laws including the *Privacy Act* and the *Income Tax Act*.
2. The information included on this form and the information respecting the RESP may be used by and shared between Human Resources and Skills Development Canada, the Canada Revenue Agency, the promoter and the Trustee for the administration (which may include policy analysis, research and evaluation) of the *Canada Education Savings Act* and the *Income Tax Act*.
3. In order for a payment of the Additional Canada Education Savings Grant and/or Canada Learning Bond to be made, my adjusted family income will be verified with the Canada Revenue Agency. My adjusted family income information will be provided to Human Resources and Skills Development Canada by the Canada Revenue Agency.

**Declaration and Consent**

I authorize the promoter to ask the Trustee to apply for the grants I have indicated on the previous page in respect of the Beneficiary.

I confirm that I am the Custodial Parent or Legal Guardian and that I am the Primary Caregiver of the Beneficiary.

I confirm that the Beneficiary meets the residency requirements set out above and agree to inform the Trustee if, at any time, there is a change in the Beneficiary's circumstances.

I designate the RESP indicated in this document to receive, in trust, any payments of the Additional Canada Education Savings Grant and/or Canada Learning Bond.

I have read and understood this document. I understand that the *Privacy Act* gives me (or my authorized representative) the right to access or request correction to my personal information kept in my government file.

Please tick one box only AND take note of this paragraph.

Yes  No I consent to the use and sharing of my personal information as mentioned above.

**NOTE:** I understand that the provision of the information is voluntary and that I am not required to give my consent; however, if I do not give my consent, Human Resources and Skills Development Canada cannot pay the Basic and/or Additional Canada Education Savings Grant nor the Canada Learning Bond to the Trustee in respect of the RESP Beneficiary.

**Important :** The signature(s) is (are) required.

\_\_\_\_\_  
Signature of Subscriber who is also the Custodial Parent / Legal Guardian and Primary Caregiver of the Beneficiary

| y | y | y | y | y | m | m | d | d |  
Date

\_\_\_\_\_  
Signature of Joint Subscriber (if applicable)

| y | y | y | y | y | m | m | d | d |  
Date