

New inscription Modification Date of modification

SECTION I: IDENTIFICATION

| | | |
|---------------------|------------------|-------------------|
| Employee Last Name: | | |
| First Name: | Employee Number: | |
| Single | Married | Common Law Single |

SECTION II : THIS SECTION IS TO BE USED SOLELY, BY THOSE WHO ANSWERED «MARRIED» OR «COMMON LAW SPOUSE» :

| | | |
|---|-----|----|
| Date of marriage or when common law union began: | | |
| Spouse's last name: | | |
| Spouse's first name: | | |
| Name of employer (spouse): | | |
| Does your spouse reside permanently with you on the Lower North Shore ? | YES | NO |
| If no, please indicate the date of departure: _____ | YES | NO |
| Does your spouse benefit from an isolation premium with dependants? | YES | NO |
| Does your spouse benefit from an isolation premium without dependants? | YES | NO |

SECTION III: ACCORDING TO THE DEFINITION¹ DO YOU HAVE ANY DEPENDANTS? If yes, complete the table below

| Last Name | First Name | Date of Birth (yyyy/mm/dd) | Nom de l'école fréquentée à temps plein & niveau secondaire ² |
|-----------|------------|----------------------------|--|
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SECTION IV: LOCALITY OF ASSIGNEMENT & SIGNATURE

| | |
|-------------------------------|---------------|
| _____ Employee's Signature | _____ Date |
| _____ Place of Assignment | |

SECTION V: INFORMATION

¹ **Definition:** A child of an employee, of an employee's spouse or of both, or a child living with the employee for whom adoption procedures have been undertaken, unmarried and living or domiciled in Canada, who depends on the employee for his financial support and who is under eighteen (18) years of age: every child under twenty-five (25) years of age who is a duly registered student attending a recognized learning institution **on a full time basis** or a child of any age who became totally disabled before reaching his eighteenth (18th) birthday or before his twenty-fifth (25th) birthday, if he was a duly registered student attending a recognized learning institution on a full time basis and has remained continuously disable ever since.

² For College and University levels, proof of admission is necessary.

NOTE: Any modifications are to be reported to the School Board (including for an absence of more than 30 days from the territory).

PLEASE FORWARD THIS FORM TO THE FOLLOWING ADDRESS: srh@csdulittoral.qc.ca

