

<b>Name of Parent/Guardian</b>	
<b>Address</b>	
<b>Phone</b>	
<b>Name of Parent/Guardian</b>	
<b>Address (if different than above)</b>	
<b>Phone</b>	

**OR**

<b>Name of Independent Student</b>	
<b>Address</b>	
<b>Phone</b>	

<b>Name(s) of student(s)</b>	<b>School attending</b>

**List of Fees to be waived or refunded:**

Fee	Total	Amount to Waive or Refund

\* Note: generally optional items and events will not be considered for waiving.

Please note any extenuating circumstances: (i.e. sudden job loss)


The following information must be completed before the application for waiver or refund is accepted for review:

- ☐ Volunteer opportunities to offset fees have been discussed with principal
- ☐ Copy of CRA income tax Notice of Assessments for each parent/guardian attached
- ☐ 'List of Fees That to be Waived or Refunded' section on page 1 has been completed

I HEREBY declare that I have read and understood the information contained on this Waiver or Refund of Fees Form and the information I have provided is correct. I accept responsibility to advise the school if there are any changes to this information. I confirm that I have the authority to sign this consent and will inform any other parent or guardian of the contents of this consent and the fact it has been signed.

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Parent/Guardian Signature

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Date

Submit your application to:  
Peace Wapiti Public School Division  
8611A -108 Street  
Grande Prairie AB T8V 4C5  
Attention: Secretary-Treasurer

The personal information collected on this form is for the purpose of education program administration. This collection is authorized by section 4(c) of the Alberta Protection of Privacy Act, the Education Act, and the Student Record Regulation. For questions about the collection of personal information, please contact the Principal of the school or the ATI Coordinator at (780) 532-8133.