

SCHOLARSHIP PROGRAM FOR DEPENDENT CHILDREN

SUBSCRIBER INFORMATION			
NAME	GREEN SHIELD NO.	S.I.N # or Employee #	
ADDRESS	EMPLOYER		
CITY	PROV.	POSTAL CODE	ADDRESS
HOME PHONE	BUSINESS PHONE	CITY	PROV. POSTAL CODE

STUDENT INFORMATION			
NAME	GREEN SHIELD NO.	S.I.N #	
ADDRESS	HOME PHONE	BUSINESS PHONE	
CITY	PROV.	POSTAL CODE	DATE OF BIRTH (Y/M/D)
SECONDARY GREEN SHIELD I.D. # FOR CO-ORDINATION OF BENEFITS, IF APPLICABLE. _____			

COURSE PROGRAM INFORMATION

EDUCATIONAL INSTITUTION _____	PHONE #: (____) _____
ADDRESS: _____	CITY _____ PROV. _____ POSTAL CODE _____

NAME OF DEGREE/CERTIFICATE	TERM		TOTAL COURSE LOAD THIS TERM	* TOTAL TUITION COSTS
	START	END		
	Y / M / D	Y / M / D		

*** Does not include books, parking fees, late fees or other educational expenses unless otherwise stipulated.**

STATEMENT OF CONDITIONS - Scholarship Program for Dependent Children

- Student is a dependent child as defined in the Collective Agreement for HSMDDV coverage on the date the school term commences and a secondary school graduate in full-time attendance at a post-secondary or post-graduate degree/diploma program at an accredited Canadian or U.S. university or community college.
- The benefit year begins September 1 and ends August 31. The starting date of the academic program will determine the benefit year to which the payment will apply. (i.e. For Tuition paid June 1st for September school term commencing on September 7th, the date of claim is September 7th and applies to benefit year from September 1st to August 31st of applicable year). Claim will not be processed until first day of school term to ensure eligibility.
- Claim must include an original paid fee statement or an original paid receipt which indicates student name, the term starting date, the student status (i.e. full term attendance or part time), and the amount paid for both tuition and fees, and a completed Green Shield claim form.
- Under Revenue Canada rules, these Scholarships are taxable as income to the employee, and as such, are subject to Federal and Provincial taxes. Only one scholarship will be granted per benefit year per dependent.
- Claim payment may be made to the employee through the employer payroll system.

I CERTIFY THAT THIS TUITION EXPENSE CLAIMED HAS NOT BEEN REIMBURSED OR PAID THROUGH ANOTHER SCHOLARSHIP, ASSISTANCE PROGRAM OR SUBSIDY.

EMPLOYEE'S SIGNATURE _____ DATE _____

STUDENT SIGNATURE _____ DATE _____

By signing this claim form and/or submitting actual receipts, I agree that the information provided is complete and accurate, to the best of my knowledge. I authorize Green Shield Canada to exchange information with other parties as required and only when the information is needed to administer this benefit claim and/or to confirm the accuracy of this information.

All claims must be submitted within 12 months of the date of service.

Submit to: **GREEN SHIELD CANADA**
P.O. Box 1615, Windsor, ON N9A 7J3
Attention: **Scholarship Program**

Customer Service Centre:
1-888-711-1119