

Primary/High School Courses Fee Waiver Application & Registration Form School of Mathematics and Statistics, Carleton University

Co	urse Nai	me:				
Ct. dant Information.						
Student Information:						
Name:						
Email Address:						
School Grade at beginn	ning of the	course:				
Year of birth:						
Mark in the latest completed Math						
Course:						
School:						
Home address:						
The registration fee for the	he course	"Primary/High Sc	hool Course	s" may be waived base	ed on finance	cial need.
		, <u> </u>		•		
	\$			Net monthly Family Income:	\$	
Number of Children			OR	Number of Children		
in the Family:				in the Family:		
g	YES	NO		Single Parent	YES	NO
(circle one)				(circle one)		
(please fill the second table	e if your incor	ne significantly change	ed from 2019 de	ue to COVID and you are rece	eiving assistan	ce from the Government)
If I will have reached my six	teenth birth	day on or prior to M	fav 1st of the c	corresponding academic v	ear then I au	thorize Carleton
University, at any time and t						
information in the custody o	or control of	Carleton University	and related to	o me. For this purpose, Ca	arleton Unive	ersity is specifically
authorized to communicate						This authorization to
disclose is effective immedi-	ately and wi	III continue in full for	rce and effect	until rescinded in writing b	by me.	
Student Name:						
Student Signature:						
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Please send this form to the School of Mathematics and Statistics via email.

Please enclose a copy of the latest "Federal Income Tax Notice of Assessment" form(s) for all guardians or a confirmation (screenshot) of assistance from the Government (e.g. CERB). Please black out any extra information, including Social Insurance Numbers.

Email: enrichment-admin@math.carleton.ca

Fax: 613-520-3536

Date (y/m/d):

Date (y/m/d):

Guardian Name (please print):

Guardian Email Address:

Guardian Signature:

Address: Carleton University, School of Mathematics & Statistics, 1125 Colonel By Drive, Ottawa, Ontario K1S 5B6

The personal information requested on this form is collected in accordance with Sections 38(2) and 41(1) of the Freedom of Information and Protection of Privacy Act (FIPPA), R.S.O. 1990, c.F.31 as amended. The information provided will not be used for any purposes other than those stated upon this form unless the applicant provides express written consent. Should you have any questions concerning your personal information please contact Margaret Tannahill-Wade, by phone: (613) 520-2152, by email: Margaret.TannahillWade@carleton.ca, FIPPA Representative for the School of Mathematics and Statistics. Carleton University is fully compliantwith FIPPA and endeavours at all times to treat your personal information in accordance with this law.