



(This policy is under review.)

**FRONTIER SCHOOL DIVISION
HOUSING ALLOWANCE – TEACHERS
ELIGIBILITY CLAIM FORM**

****Must be submitted annually each September****
Send completed form to the Payroll department, Division Office

Name Address

I declare that according to Policy GVC-Housing Allowance –Teaching Staff I am:

- a. Claiming the Single Housing Allowance.
- b. Claiming the Dependent’s Housing Allowance.
(Claiming spouse and/or dependents.)

Payment to be distributed as follows (circle one):

- Pay the full amount of housing allowance to me.
- Divide the housing allowance equally between my partner _____ and I.
(Name)

I undertake to notify the Payroll department of any changes that will affect the above declaration, and agree to any adjustments to the amount of housing allowance payable arising therefrom.

I declare that the foregoing eligibility claim for housing allowance is an accurate account of my status.

Date Signature

Adopted September 1, 2009		
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