

Change of Information Form

1. You are required to complete a Change of Information Form if you have any changes.
2. Mail the Form in the return envelope provided. No postage is required.
3. The Form must be mailed as soon as change happens.
4. **If you have any questions regarding your Change of Information Form or service related matters, contact your caseworker directly.**
5. You are legally obliged to immediately report to your caseworker any changes related to income, assets, family size and/or accommodation.

Income Reporting Statement (IRS)

1. You are required to complete the Income Reporting Statement if your income changes.
2. Mail the IRS form in the return envelope provided. No postage is required.
3. IRS must be mailed on the 15th of the month.
4. **If you have any questions regarding your Income Reporting Statement or service related matters, contact your caseworker directly.**

If you are leaving Ontario Works, you may be eligible for additional benefits. Contact your caseworker.

Signature	Date
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Change of Information Form

Office Use Only	MEMBER ID	OFFICE	CASEWORKER NO.
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Only if you are reporting changes, complete and mail immediately in one of the envelopes provided. To enrol in Direct Bank Deposit or to report bank changes, see reverse.

New Address		Postal Code
Phone number	Date of move	New rental costs (attach receipt/leases)
Family changes (give details)		
Have day care costs changed? (attached receipts)	Has your income changed?	Details
<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	
Have your assets changed?	Details	
<input type="checkbox"/> yes <input type="checkbox"/> no		
Have you started or changed jobs?	How often are you paid?	Date started
<input type="checkbox"/> yes <input type="checkbox"/> no		
Name of Company		

Income Reporting Statement

Office Use Only	MEMBER ID	OFFICE	CASEWORKER NO.
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To receive your payment without delay, you must attach any pay stubs, statements, or photocopies of your cheques.

Please complete and mail the Income Reporting Statement on:
Gross income to be declared from

Gross Amount of Income Received (See reverse for examples)			
Type of Income	Client	Spouse	Dependent
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

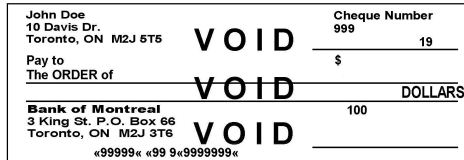
* It is your legal obligation to report any changes in your income. Failure to do so may result in civil action and/or criminal charges.

Signature	Date
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MEMBER ID	OFFICE	CASEWORKER NO.
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Direct Bank Deposit Authorization

Transit No. (5 digits) <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<i>Please complete this section and attach an updated copy of your bank statement, as well as your bank information or a voided cheque.</i>
Institution No. (3 digits) <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	
Account Number (up to 12 digits) <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	



Instructions

- " **Please print clearly.**
- " **Do not complete shaded boxes.**
- " **Form must be signed and dated.**
- " **Contact your worker if you require assistance to complete this form.**

Check here ,
If this is a new account.

Notice with Respect to the Collection of Personal Information (Municipal Freedom of Information and Protection of Privacy Act) This information is collected under the legal authority of the Ontario Works Act, 1997, for the purpose of administering employment assistance and basic financial assistance programs. For more information contact the Client Service & Information Unit, Program Support Manager at (416) 397 - 0294.

I hereby authorize Toronto Employment & Social Services to deposit directly to the account indicated above.

This authorization will continue until I give written notice to either change the account number or stop the direct deposit.

I understand the importance of giving accurate banking information to ensure that funds are deposited to the correct account.

Date

Applicant's Signature

* **Please note:** All gross amounts from income must be declared for the reporting period and photocopies of all stubs must be sent in with your Income Reporting Statement.

Some examples of income include:

- | | | |
|---|---|---|
| <ul style="list-style-type: none"> • Ontario Student Assistance Program • Employment income • Training income • Rental income • Boarder / Roomer income • Support income • Mortgage income • Other income | <ul style="list-style-type: none"> • Employment Insurance • Workplace Safety and Insurance Board • Canada Pension Plan • Old Age Security • Guaranteed Income Supplement • Company Sick Benefits • Superannuation • Social Security - U.S.A. • Survivors Pension | <ul style="list-style-type: none"> • Foreign Pension • Company Pension • War Veterans Allowance • Guaranteed Annual Income System • Insurance Benefits • Annuities • Quebec Pension Plan • Private Accident Sick Benefits • Other Benefits |
|---|---|---|

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