

## Supplement to the Work Premium Application for Advance Payments

You can apply for the supplement to the work premium on your income tax return. However, you must complete this form if you want to receive advance payments of the supplement to the work premium. For more information, refer to page 2. Send the duly completed and signed form to a **Services Québec office** in order for your application to be transferred to us.

### 1 Information about you (the applicant)

1	Last name			2	Social insurance number		
3	First name			4	Date of birth		
					Y	Y	Y
					Y	Y	Y
					M	M	D
5	Apartment	Street number	Street name, P.O. box				
6	City, town or municipality			Province	Postal code		

### 2 Information about eligibility for the supplement to the work premium

20 Enter the first month in which you stopped receiving last-resort financial assistance or financial assistance under the Aim for Employment Program because of work income earned by you or your spouse. ....

21 For the month entered on line 20, did you hold a valid claim slip enabling you to receive certain dental and pharmaceutical services? .... ☐ Yes ☐ No

22 Did you receive last-resort financial assistance or financial assistance under the Aim for Employment Program for at least 24 of the 30 months preceding the month entered on line 20? .... ☐ Yes ☐ No

23 Are you resident in Québec? .... ☐ Yes ☐ No

24 Are you a Canadian citizen, an Indian, a permanent resident or a person on whom Canada has conferred refugee protection? .. ☐ Yes ☐ No

25 Enter the first month, as of the month entered on line 20, in which your work income was \$200 or more. If you cannot enter anything, go to Part 3 and contact us when your work income for a given month is \$200 or more. ....

26 Enter the number of months, as of the month entered on line 25, in which your work income was \$200 or more. Do not include the month in which you file this application. ....

27 Are you a full-time student? .... ☐ Yes ☐ No

28 On December 31, will you be living with a child of whom you are the mother or father? .... ☐ Yes ☐ No

### 3 Direct deposit

30 Have you registered for direct deposit? .... ☐ Yes ☐ No

If you have already registered for direct deposit of income tax refunds, go to Part 4. If you have not yet registered for direct deposit, **you must do so**. Enclose a **blank cheque** marked "VOID." Also write your name and social insurance number on the cheque. If you cannot provide a void cheque, complete the section below.

Name of financial institution

Address of branch

Postal code

31 Branch number Financial institution number Account number and check digit

### 4 Certification

I certify that the information provided on this form is accurate and complete. I undertake to inform Revenu Québec promptly of any change that could make me ineligible for the supplement to the work premium for a given month, such as if I move outside Québec, if I expect that my work income will be less than \$200 for the month or if I once again begin receiving last-resort financial assistance or financial assistance under the Aim for Employment Program.

X

Applicant's signature Date Area code Telephone (home or cell) Area code Telephone (work) Extension



14AE ZZ 49526569

# Information on the Application for Advance Payments

Please read the information below before completing your application for advance payments of the supplement to the work premium. If you have any questions, call Services Québec, toll-free, at 1 877 767-8773.

## 1 Is this the right form for you?

Complete this form if, because of work income earned by you or your spouse, you stopped receiving last-resort financial assistance or financial assistance under the Aim for Employment Program.

The supplement to the work premium corresponds to a monthly amount of \$200, which may be granted for each month in which your work income is \$200 or more, for a maximum of 12 consecutive months.

If your spouse is also entitled to the supplement and wants to receive advance payments, they must file a separate application.

## 2 Requirements

To be entitled to advance payments of the supplement to the work premium, you must meet the following requirements:

- You held, for the first month in which you stopped receiving **last-resort financial assistance or financial assistance under the Aim for Employment Program** because of work income earned by you or your spouse, a valid claim slip issued by the Ministère de l'Emploi et de la Solidarité sociale enabling you to receive certain dental and pharmaceutical services.
- You received last-resort financial assistance or financial assistance under the Aim for Employment Program for at least 24 of the 30 months preceding the month in which you were no longer eligible for such assistance.
- **Your work income** for the month for which you are requesting the supplement **is \$200 or more** and you are not receiving last-resort financial assistance or financial assistance under the Aim for Employment Program for that month.

Work income corresponds to the total of both gross income from employment (including tips) and net income from any business you carry on alone or as a partner actively engaged in the business. If you are an Indian, you cannot include income situated on a reserve or on premises in your work income.

- You are resident in Québec at the time of your application and you are a Canadian citizen, an Indian, a permanent resident or a person on whom Canada has conferred refugee protection.
- You are 18 years of age or older on the first day of the month in which you file your application or, if you are under 18 years of age, no one is entitled to receive a child assistance payment with regard to you for the year.
- You will not be confined to a prison or similar institution on December 31, and you will not have spent a total of more than 183 days there over the course of the year.
- You **are not** a full-time student (if you are a full-time student, you are not entitled to the supplement to the work premium unless, on December 31, you are the mother or father of a child who lives with you).

A full-time student is a person who is enrolled in an educational program and who, during the year, begins and completes one term of vocational training at the secondary level or post-secondary studies during which they devote **at least nine hours** per week to attending classes or completing assignments in the course of the program. If the person has a major functional deficiency within the meaning of the *Regulation respecting financial assistance for education expenses*, they must receive, as part of their program, **at least 20 hours** of instruction per month.

- You authorize us to deposit advance payments directly into your account.

Note that we may reject this application for advance payments or stop or suspend payments if you or your spouse received advance payments for a previous year and you have not yet filed your income tax return for the year in question by the time your application is processed or if information or documents brought to our attention justify it. We may require additional information or documents.

## 3 Change in situation

Please call us immediately if your situation changes after you apply for advance payments of the supplement to the work premium and:

- you **no longer meet** one of the requirements mentioned in Part 2 because, for example, you:
  - expect that your work income for a given month will be less than \$200,
  - once again begin receiving last-resort financial assistance or financial assistance under the Aim for Employment Program,
  - move outside Québec, or
  - enrol in a program for at least one term as a full-time student, and on December 31, you no longer live with a child of whom you are the mother or father;
- you **become eligible** for advance payments because, for example, your work income for a given month was \$200 or more.

To contact us:

- if you are in the Montréal area, call 514 940-1481;
- if you are in the Québec City area, call 418 266-1016;
- if you are elsewhere in Québec, call, toll-free, 1 855 291-6467.

## 4 Terms of payment

Advance payments will be made by direct deposit, into an account you have at a financial institution with an establishment located in Canada, on the 15th of each month following the one for which you applied for the supplement.

## 5 Income tax return

If you receive advance payments of the supplement to the work premium during the year, you must file an income tax return for that year and enter on line 441 the total amount of the supplement you received. The amount is shown on the RL-19 slip we sent you. It includes the amount of the advance payment for December, which you will receive in January of the following year. You must also complete Schedule P of the income tax return to calculate the amount of the supplement to the work premium to which you are actually entitled for the year, and then enter the amount on line 456 of the return.

You may be required to repay amounts you received as advance payments if you do not meet the requirements for claiming the tax credits respecting the work premium or if your situation changes during the year.



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