## **Child Support**

# Court of Queen's Bench

Application for Child Support

Government of Alberta ■

Justice and Attorney General

# Instructions Child Support

## Before you Begin:

- You must have a divorce file in the Court of Queen's Bench to use this form. If you do not, talk to us about how to start.
- See our booklet, "Making a Court Application in the Court of Queen's Bench (With an Application Form") for more information about how to prepare, file and serve court forms and how to present your case in court.

## Gather up the documents you will need to prove your case

- It is usually helpful for the judge to see proof of income for both parties. You must file your income information if any of the following applies:
  - Any of the children live with the other party;
  - You and the other party have shared or split custody; or
  - You are claiming any special or extraordinary expenses for the children.
- The income information that you must provide is:
  - Your complete tax return for each of the past 3 years;
  - The Notice of Assessment form from the tax department for each of the past 3 years; and
  - Your pay stub or other proof showing the income you have received from all sources this year.
- If you are self-employed, work through a corporation that you control or are in a partnership, you must also provide financial statements, corporate tax returns and other proof of income. See the Notice to Disclose / Application form for a complete listing.



## Tip:

If you have already attached your income information to a filed Affidavit or to a Response to Notice to Disclose, you do not have to provide it again.

- There may be other documents that you should attach to your court forms. For example:
  - If you are asking for any special or extraordinary expenses for your children, attach receipts for those expenses, if you have them.
  - If you are claiming support for a child over the age of 18, attach income information for that child for any year in which they have earned an income
  - If you are claiming support for a child over the age of 18 because they are in school, attach proof that they are registered in an educational institution, including the number of classes and/or hours per week of instruction.

- If you are asking for retroactive support, attach income information back to the date that you are wanting the support to begin.
- If you are claiming undue hardship, attach income information for any other adult in your household.

## Fill in the Application form

• Follow the instructions on the form and in the "Making a Court Application" booklet.

#### Fill in the Affidavit form

- Follow the instructions on the form and in the "Making a Court Application" booklet.
- This form has been prepared with the information that the court is likely to want to see. You can, if you wish, change the content of the form to set out the information in a way that you think is best.
- All of the documents that you want the judge to see must be written about in the Affidavit and attached as exhibits to the Affidavit.

## After the other party has been served, fill in the Affidavit of Service form

• Follow the instructions on the form and in the "Making a Court Application" booklet.

These instructions have been prepared for you by Family Justice Services / Family Law Information Centre. Contact us at:

#### Calgary

Family Justice Services
7<sup>th</sup> floor, Calgary Courts Centre
601 - 5 Street SW
Phone 403-297-6981

#### **Grande Prairie**

Law Information Centre Main Floor, Court House 10260 - 99 St. Phone: 780-833-4234

#### **Red Deer**

Family Justice Services Main Floor, Court House 4909 - 48 Ave Phone: 403-755-1468

#### Edmonton

Family Law Information Centre Main Floor, Law Courts 1A Sir Winston Churchill Square 97 Street & 102A Avenue Phone 780-415-0404

#### Lethbridge

Family Justice Services 1<sup>st</sup> Floor, Court House 320 - 4 St. S Lethbridge AB T1J 1Z8 Phone: 403-388-3102

#### **Medicine Hat**

Family Justice Services Court House 460 First Street SE Medicine Hat, AB T1A 0A8 Phone 403-529-8716

Outside these centres, contact us toll free at 310-0000

			Clerk's Stam	p
COURT FILE NUMBER				
COURT	Court of Queen's E	3ench of Alberta		
JUDICIAL CENTRE				
APPLICANT				
RESPONDENT				
DOCUMENT	Family Law A for Child Sup			
ADDRESS FOR SERVICE AND CONTACT INFORMATION OF PARTY FILING THIS DOCUMENT	Applicant's Name			
	Full address			
	( )			
NOTICE TO THE RES	PONDENT(S)			
	ore the judge. To do	are a Respondent. You so, you must be in Cour		
COURT DATE:		,	, 20	
	Weekday	Month	Day	Year
TIME:	Time of Day			
WHERE:	Courtroom (if know	wn), Street address of co	ourthouse	
BEFORE WHOM:	Justice in Family	Chambers		
Go to the end of this do	ocument to see wha	at else you must do and	when you must do it.	

## 1. REMEDY CLAIMED OR SOUGHT

An Order for the table amount of child support starting on:  (Date you want the child support order to start)
If you know the amount of child support that would be payable under the Federal Child Support Guidelines, enter that amount here:
(Amount)
An Order for child support in the amount of \$ per month, which is different than the table amount under the Federal Child Support Guidelines.
An Order setting my income and / or the other parent's income for the purpose of child support.
An Order setting the percentage or amount that each parent is required to contribute to the following Section 7 expenses: (Check the boxes that apply)  child care expenses medical / dental insurance premiums health related expenses that are more than \$100 per year extraordinary school expenses post-secondary education expenses extraordinary expenses for extracurricular activities
An Order that the Respondent pay retroactive child support back to
(Date you want retroactive child support to start)
Any other remedies, including costs, that the Court determines to be appropriate.
Other: (Describe any other changes that you would like to your child support order)

0	(Date)
MA	ATERIAL OR EVIDENCE TO BE RELIED ON:  I am relying on the evidence set out in my Affidavit sworn on:
	Date)
AF	PPLICABLE RULES:  Rule 13.5 Variation of time period Other: (Please indicate Rule Number)
AF	PPLICABLE ACTS AND REGULATIONS:  Divorce Act (Canada) Federal Child Support Guidelines Other: (Please indicate other Acts / Regulations)
ΑN	IY IRREGULARITY COMPLAINED OF OR OBJECTION RELIED ON:  Not applicable
(S	Specify:
in a	most circumstances, this section will be left blank. But, if you are asking for your application to be heard a different way (such as videoconference, or teleconference) you must speak with the Clerk about what write in this space.)

## **WARNING**

If you do not come to Court on the date and time shown above either in person or by your lawyer, the court may give the Applicant what the Applicant wants in your absence. You will be bound by any order that the Court makes.

If you intend to rely on an affidavit or other evidence when the application is heard or considered, you must:

- Swear or affirm an affidavit;
- File the affidavit or other evidence with the Court; and
- Serve the affidavit or other evidence on the applicant a reasonable time before the application is scheduled to be heard or considered.

			Clerk's Stamp
COURT FILE NUMBER			
COURT	Court of Queen's Bench	of Alberta	
JUDICIAL CENTRE			
APPLICANT			
RESPONDENT			
DOCUMENT:	Affidavit - Child Sup	port	
SWORN / AFFIRMED BY:	Name of person making this A	ffidavit	
SWORN / AFFIRMED ON:	Date Affidavit sworn / affirmed		
ADDRESS FOR SERVICE AND CONTACT INFORMATION OF PARTY	Name		
	Full address		
	( )		
l,	, of		, Alberta,
Your name		Name of City / Town	
SWEAR / AFFIRM AND SA	AY THAT:		
	rledge of the following information therefore, in which case, I believe the person, in which case, I believe the case, I belie		
GENERAL INFORMATION			
2. I am: (Choose one)			
married to the R	espondent. We separated on _	Date	,  
divorced from th	ne Respondent. We were divorc		,  

3. The following chart gives basic information about the child(ren) in this case: (List all children involved in this case, even those for whom no support is being claimed)

	Child's full legal name	Age	Birthdate (dd / mm / yyyy)	Support claimed for child? (YES or NO)		
4.	The existing custody and access a (Give details of the arrangements that	rrangements for the	e child(ren) are as follows: e children. Specify dates and times)			
	Child's name	C	Custody / Access Arrangement			
CHIL	D SUPPORT					
5.	Check the box that contains the statement that is true for you:					
	The other parent and I do not have a verbal or written agreement for me or the other parent to pay child support.					
	The other parent and I have a ve support. (If you checked this box			arent to pay child		
	The details of our child support agreement are as follows:					

Date of or agreement (dd / mm / yyyy)	Present monthly child support payment	Other details about our child support agreement
	\$	

	(Only check off this box if you are attaching a copy of the written agreement to your Affidavit). Attached as Exhibit '' is a copy of the written agreement between me and the other parent for payment of child support.			
'Add	on' or Special Expenses			
6.	(Choose one)			
	I have no special expenses for the child(ren).			
	I have the following special expenses for the child(ren):			
	Special Expense	Gross Annual Amount		
	Child care expenses (daycare/babysitting)	\$		
	Children's portion of medical or dental premiums	\$		
	Health-related expenses in excess of \$100 annually per illness or event, net of reimbursement	\$		
	Extraordinary expenses for primary/secondary school	\$		
	Expenses for post-secondary education  Tuition amount: \$	\$		
	Extraordinary expenses for extracurricular activities	\$		
	and the nature of each expense. If you are attaching any receipts, they must be n	narked as exhibits).		
	I believe the above special expenses are necessary and reasonable beca	use: (Give details)		
Medi	cal or Dental Insurance Coverage			
7.	(Choose one)  I do not have health benefit coverage available to me for the children.			
I have health benefit coverage available to me for the children. Details of the (Give details of coverage and cost of the plan)				

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Date (Give details, including prospects of employment and benefits you are receiving, steps you are taking to f		The Respondent does not have health benefit coverage a	vailable to him/her for the children.			
I am the Applicant and (Choose one):  I am the person who will be receiving child support under a Court order (recipient).  I am the person who will be paying child support under the Court order (payor).  I expect my gross annual income this year to be \$		asking that he/she keeps this coverage for the children. I				
□ I am the person who will be receiving child support under a Court order (recipient).   □ I am the person who will be paying child support under the Court order (payor).   I expect my gross annual income this year to be \$	me (	of the Applicant				
☐ I am the person who will be paying child support under the Court order (payor).  I expect my gross annual income this year to be \$	I an	n the Applicant and (Choose one):				
I expect my gross annual income this year to be \$		I am the person who will be receiving child support under a	Court order (recipient).			
My current employment status is as follows: (Choose all that apply)    I am employed.   I am self-employed.   Details of my employment / self-employment are:    (Name and address of employer or place of business)   (Position)   (Length of time in this position)     I have been unemployed since and details of my unemploym     Date   (Give details, including prospects of employment and benefits you are receiving, steps you are taking to the self-employment and benefits you are receiving, steps you are taking to the self-employment and benefits you are receiving, steps you are taking to the self-employment and benefits you are receiving, steps you are taking to the self-employment and benefits you are receiving.		I am the person who will be paying child support under the	Court order (payor).			
My current employment status is as follows: (Choose all that apply)    I am employed.   I am self-employed.   Details of my employment / self-employment are:    (Name and address of employer or place of business)   (Position)   (Length of time in this position)     I have been unemployed since and details of my unemploym     Date   Date     (Give details, including prospects of employment and benefits you are receiving, steps you are taking to find the self-employment and benefits you are receiving, steps you are taking to find the self-employment and benefits you are receiving, steps you are taking to find the self-employment and benefits you are receiving.	:l ex	spect my gross annual income this year to be \$	, because:			
☐ I am employed.         ☐ I am self-employed.         Details of my employment / self-employment are:         (Name and address of employer or place of business)         (Position)         ☐ I have been unemployed since and details of my unemployment						
☐ I am employed.         ☐ I am self-employed.         ☐ Details of my employment / self-employment are:         (Name and address of employer or place of business)         (Position)         ☐ I have been unemployed since and details of my unemployment						
☐ I am employed.         ☐ I am self-employed.         Details of my employment / self-employment are:         (Name and address of employer or place of business)         (Position)         ☐ I have been unemployed since and details of my unemployment						
☐ I am employed.         ☐ I am self-employed.         Details of my employment / self-employment are:         (Name and address of employer or place of business)         (Position)         ☐ I have been unemployed since and details of my unemployment						
☐ I am employed.         ☐ I am self-employed.         ☐ Details of my employment / self-employment are:         (Name and address of employer or place of business)         (Position)         ☐ I have been unemployed since and details of my unemployment						
☐ I am self-employed.  Details of my employment / self-employment are:  (Name and address of employer or place of business)  (Position)  (Length of time in this position)  ☐ I have been unemployed since	Му	current employment status is as follows: (Choose all that app	ly)			
☐ I am self-employed.  Details of my employment / self-employment are:  (Name and address of employer or place of business)  (Position)  ☐ I have been unemployed since		I am employed				
Details of my employment / self-employment are:  (Name and address of employer or place of business)  (Position)  (Length of time in this position)  Date  (Give details, including prospects of employment and benefits you are receiving, steps you are taking to find the self-employment and benefits you are receiving, steps you are taking to find the self-employment and benefits you are receiving.	П					
(Name and address of employer or place of business)  (Position)  (Length of time in this position)  I have been unemployed since and details of my unemployment						
(Position)  I have been unemployed since and details of my unemploym  Date  (Give details, including prospects of employment and benefits you are receiving, steps you are taking to the state of		Details of my employment / self-employment are.				
(Position)  I have been unemployed since and details of my unemploym  Date  (Give details, including prospects of employment and benefits you are receiving, steps you are taking to the state of		(Name and address of ampleyer or place of business)				
I have been unemployed since and details of my unemploym  Date  (Give details, including prospects of employment and benefits you are receiving, steps you are taking to the state of		(Name and address of employer of place of business)				
I have been unemployed since and details of my unemploym  Date  (Give details, including prospects of employment and benefits you are receiving, steps you are taking to the state of		(Position)	(Length of time in this position)			
Date  (Give details, including prospects of employment and benefits you are receiving, steps you are taking to t			, ,			
(Give details, including prospects of employment and benefits you are receiving, steps you are taking to f		I have been unemployed since	and details of my unemployment a			
		Date	<del></del>			
amployment or it in echaal type at program and expected completion data)						
employment, or if in school, type of program and expected completion date)		employment, or if in school, type or program and expected comp	orenori date)			

10.	(Choose one)
	I am not a shareholder, director or officer of a corporation.
	I am a shareholder, a director, and/or an officer of a corporation.
	Attached as Exhibit '' to my Affidavit are copies of the financial statements of this corporation for each of the last 3 years.
11.	Attached as Exhibit '' to my Affidavit are copies of: (Choose one)
	my Income Tax and Benefit Return (T1 General) and notices of assessment and reassessment from Canada Revenue Agency for each of the 3 most recent taxation years.  the Canada Revenue Agency printout of my income tax returns for the last 3 years.
12.	Attached as Exhibit '' to my Affidavit are copies of: (Choose one)
	my 3 most recent pay statements from my employer. a statement from my employer outlining my gross pay and deductions for the year to date, and my rate of annual salary.
13.	Attached as Exhibit '' to my Affidavit are copies of my other financial information: (Attach any other relevant documents to support the guideline income calculation, such as: student finance information or the most recent statements of income from employment insurance, social assistance, pension, disability, or workers compensation.)
14.	(Choose one)
	I do not expect any significant changes in my employment situation.
	I expect the following changes in my employment situation:  (Describe changes, including expected raises or changes in salary)
Inco	ome of the Respondent
15.	The other parent is the Respondent and (Choose one):
	He or she is the person who will be paying child support under the Court order (payor).
	He or she is the person who will be receiving child support under a Court order (recipient).

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The Re	espondent's current employment status is as follows: (C	Choose all that apply)
	do not know anything about the Deependent's current of	maleument etetue
	do not know anything about the Respondent's current e he Respondent is employed.	employment status.
$\overline{}$	he Respondent is self-employed.	
	Details of his/her employment / self-employment are: (pr	ravide if known)
	retails of fils/fier employment / self employment are. (pr	ovide ii kilowiij
<u>(/</u>	Name and address of employer or place of business)	
(F	Position)	(Length of time in this position)
T	he Respondent has been unemployed since	and details of his
u	nemployment are:	
(0	Give details, if known, including prospects of employment and	benefits the Respondent is receiving, steps h
is	s taking to find employment, or if in school, type of program an	d expected completion date)
_		
_		
(Choos	e one)	
	I do not know if the Respondent is involved in a corp	poration.
	The Respondent is a shareholder direct	or officer of a corporation.
	I do not have any financial documents from	this corporation.
	Attached as Exhibit '' to my Affidavit a	·
	corporation that I have in my possession or that the	
(Choos	e one)	
	I do not have any of the Respondent's income tax in	iformation.
	·	
	I have copies of the Respondent's income tax docur	•
	Affidavit are copies of the Respondent's income tax that have been provided to me by the Respondent.	uocuments that i have in my possession

19.	(Cho	ose one) I do not have any documents providing me with details of the Respondent's pay from employment.
		Attached as Exhibit '' to my Affidavit are copies of pay stubs or a statements from the Respondent's employer that I have in my possession or that have been provided to me by the Respondent.
20.	(Atta	ched as Exhibit '' to my Affidavit are copies of: ch any other relevant documents to support the guideline income calculation for the Respondent, as: student finance information or the most recent statements of income from employment insurance, social stance, pension, disability, or workers compensation)
lmnı	ıtina l	ncome
_		
21.	(Con	nplete only if you want the Court to impute income to the Respondent)
		I have served a Notice to Disclose on the Respondent but the Respondent fails to provide me with the required information I ask the Court to impute an income of \$ to the Respondent for the following reasons:
Retr	oactiv	ve Support
22.	(Con	nplete only if you want retroactive child support from the Respondent)
		Lam colving for the Department to pay retrocative child support starting
		I am asking for the Respondent to pay retroactive child support starting (date you want the retroactive child support to start). I am asking for retroactive child support for the following reasons:

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-	
orn (OP Affirmed) before me	_
orn (OR Affirmed) before me	
, 20	
, Alberta.	
	Signature of person swearing / affirming Affidav
nmissioner for Oaths in and for the	
vince of Alberta, Justice of the Peace	J ID Verified
lotary Public	<del></del>

001			Clerk's Stamp			
CO	URT FILE NUMBER					
COURT		Court of Queen's Bench of Alberta				
JUE	DICIAL CENTRE					
APPLICANT						
RES	SPONDENT					
DOC	CUMENT	Affidavit of Personal Service				
SW	ORN / AFFIRMED BY					
		Name of person making this Affidavit				
SWORN / AFFIRMED ON		Date Affidavit sworn / affirmed				
	DRESS FOR SERVICE					
AND CONTACT INFORMATION OF PARTY FILING THIS DOCUMENT		Name				
		Full address				
		( )				
	l,	_ , of _	, Alberta,			
	(Name of pers	son who served) (Name of City / Town)				
SW	/EAR / AFFIRM AN	D SAY THAT:				
1.	. I have personal knowledge of the following information, except where I say that what is stated is based on information from another person, in which case, I believe that information to be true.					
2.	. I am 18 years of age or older.					
3.	On	, I served the Applic	cant OR			
	(Name of the Applican	with the following tor Respondent)	documents:			
		on form filed				
			(Date filed)			
		ng Application form filed	(Date Filed)			

	Affidavit filed		
-	Claim filed		(Date Filed)
	<u></u>		(Date Filed)
L	Statement filed		(Date Filed)
L	Order filed		(Date Filed)
	Other:  (Name of document and date filed with the Court. If not filed, attach a true copy of the document as a Exhibit to this Affidavit)		
the 🗌	ed the documents listed above I Applicant OR Respondent Appliete address where you served the Applie	t at:	nal service, that is, I left the documents with
Sworn (Of	R Affirmed) before me	)	
on	, 20	-	
at	, Alberta.	_	Signature of person swearing / affirming Affidavit
in and for	ommissioner for Oaths the Province of Alberta, Justice le Peace or Notary Public	J	I.D. Verified