

## APPLICATION FOR CANADA DISABILITY SAVINGS GRANT AND/OR CANADA DISABILITY SAVINGS BOND

### ATTENTION: IMPORTANT INFORMATION ABOUT GRANT APPLICATION REQUIREMENTS

#### To apply for Registered Disability Savings Plan (RDSP) Grant and/or Bond:

- Complete the main form (ESDC EMP 5608) with the accountholder of the RDSP account.
- If accountholder only wants to apply for one of Grant or Bond, complete both the main form of this Form 2030 -- ESDC Form EMP5608 and EMP5490 (Revocation of Canada Disability Savings Grant and/or Canada Disability Savings Bond).

#### Annex A (ESDC EMP 5609) must be completed if:

- There is one or more joint accountholder on the RDSP account.

Note: A separate Annex A must be completed for each joint accountholder of the RDSP account.

#### Annex B (ESDC EMP 5610) must be completed if:

- Complete this form if the beneficiary is 18 years of age or under at the time of the application or was 18 years or under during any part of the ten-year period prior to the application, if the beneficiary was eligible for the Disability Tax Credit for any of those years.

Note: A separate Annex B must be completed for each primary caregiver.

### INSTRUCTIONS

#### Financial Advisor:

- Assist client(s) in completion of RDSP Grant and/or Bond application form 2030.
- If needed, contact BMO Mutual Funds Client Contact Centre at 1-800-668-7327 (English) or 1-800-304-7151 (French) for assistance in completing the form.
- Review form to verify completion.
- To fax completed RDSP Grant and/or Bond application form 2030 to BMO Mutual Funds Client Contact Centre at 1-800-200-2497.



# APPLICATION FOR: Canada Disability Savings Grant and/or Canada Disability Savings Bond

### Instructions:

1. This form is to be completed by the holder and the beneficiary (when of age of majority) of the Registered Disability Savings Plan (RDSP) to apply for the Canada Disability Savings Grant and/or Canada Disability Savings Bond. If the beneficiary is not of age of majority at the time of the original application, they should complete a new form when they turn 18 years of age, provided that they have legal capacity to sign for themselves.
2. Read this document carefully. If you have any questions, do not hesitate to ask the RDSP issuer.
3. This form is valid only if completed, signed (or consent is provided to the issuer in an accepted manner), dated and given to the issuer. Do NOT send directly to Employment and Social Development Canada (ESDC). Keep a copy for your records.

RDSP Issuer

RDSP Contract No.

## 1 Information about the Beneficiary

### Beneficiary

Complete the following information about the beneficiary of the RDSP.

- The name must be entered exactly as it appears on Social Insurance Number (SIN) documentation.

The **beneficiary** is the person who will receive the funds in the RDSP.

Beneficiary's Last Name

Beneficiary's First Name

Beneficiary's Middle Name

Date of Birth (YYYY-MM-DD)

Social Insurance Number (999 999 999)

## 2 Information about the Holder

### Holder

Complete the following information only if the holder is different from the beneficiary of the RDSP.

- The name must be entered exactly as it appears on Social Insurance Number (SIN) documentation.
- If there is more than one holder, please complete Annex A for each of the other holders.

You are the **holder** if you opened the RDSP.

or

In the case of a child care agency, the agency is the holder.

Holder's Last Name

Holder's First Name

Holder's Middle Name

Name of Agency

Name of Agency Representative

Social Insurance Number/ Business Number (if an Agency)

Total Number of Holders

- Note: the Social Insurance Number contains nine digits (999 999 999) and the Business Number contains fifteen alphanumeric characters (999 999 999 TX 9999)

## 3 Declaration and Consent of the Holder

The holder, if not the **beneficiary**, must read this section and sign (or provide consent in an accepted manner) to receive grants and bonds in the RDSP.

If the holder is also a *primary caregiver*, complete Annex B.

Complete this section only if you completed Section 2, and are not the beneficiary.

I authorize the issuer to apply for the grant and/or the bond on behalf of the designated beneficiary.

I confirm that the designated beneficiary meets all eligibility criteria identified in Section 5.1 and I agree to inform the issuer if, at any time, there is a change in the beneficiary's circumstances.

I consent to the use and sharing of the beneficiary's personal information as long as they are less than the age of majority or lack legal capacity.

I understand that the *Privacy Act* gives me the right to access or request correction to my personal information kept in the government file and as the authorized representative to do so for that of the beneficiary (if applicable, and provided that they are less than the age of majority or lack legal capacity).

I confirm that I have read and understood this document, including my privacy rights found in Section 7, and I have received a copy of this document. I consent to the use and sharing of my personal information. I certify that the information provided on this form is accurate to the best of my knowledge.

Date (YYYY-MM-DD)

Holder's Signature

## 4 Declaration and Consent of the Beneficiary

The beneficiary must read this section and sign (or provide consent in an accepted manner) to receive grants and bonds in the RDSP if the beneficiary is of the age of majority and has legal capacity to sign for themselves.

If you indicated that you are the beneficiary in Section 1, complete this section if you have reached the age of majority, and if you have legal capacity to sign for yourself.

Upon completion of this section, this form will be added to the issuer's records once the beneficiary turns 18 years of age, if the beneficiary has not previously provided consent.

I authorize the issuer to apply for the grant and/or the bond on my behalf.

I confirm that I meet all eligibility criteria identified in Section 5.1 and agree to inform the RDSP issuer if, at any time, there is a change in my circumstances.

I consent to the use and sharing of my personal information.

I understand that the *Privacy Act* gives me the right to access or request correction to my personal information kept in the government file.

I confirm that I have read and understood this document, including my privacy rights found in Section 7, and I have received a copy of this document. I consent to the use and sharing of my personal information. I certify that the information provided on this form is accurate to the best of my knowledge.

Date (YYYY-MM-DD)

Beneficiary's Signature

## 5 Conditions for Payment of the Grant and/or Bond

This section explains some important conditions under which the grants and the bonds may be paid into an RDSP.

For more information, please refer to the *Canada Disability Savings Act* and the *Income Tax Act*.

1. The beneficiary must be eligible to receive the Disability Tax Credit (DTC) and be resident in Canada in the year in which the contribution to the RDSP is made (or, if applicable, the year to which the contribution is allocated) and in the year (or years) to which a bond is payable, as well as immediately before the bond is paid.
2. In order for the grant or bond to be paid, an application must be made on or before December 31 of the year the beneficiary turns age 49. In addition, for the grant, contributions must also be made on or before this date.
3. The total of all contributions and 'rollover' amounts deposited to the RDSP of a beneficiary must not exceed \$200,000.
4. Not more than \$70,000 in grants and \$20,000 in bonds may be paid into the RDSP of a beneficiary during the beneficiary's lifetime.
5. The amount of grant and bond entitlement for a given year depends on the beneficiary's family income of the second preceding tax year (for example, 2021 amounts are based on 2019 family income).
6. A beneficiary can be paid unused grant and bond entitlements from the past 10 years – if the beneficiary met all eligibility criteria during those previous years. An application and a contribution (if applicable) must be made on or before December 31 of the year the beneficiary turns age 49. The matching rate for grants will be the same rate that would have applied had the contribution been made in the year in which the grant entitlement was earned. The amount of unused grant and bond entitlements depends on the family income established for the particular year that the unused entitlement was earned.
7. Grants and bonds can be paid on unused entitlements up to an annual maximum of \$10,500 for grant and \$11,000 for bond.

## 6 Payment of the Grant and/or Bond

This section clarifies some of the administrative processes around the payment of the grant and bond.

The application for the grant and the bond, as applicable, will be submitted to ESDC's electronic system by the issuer at the time of each contribution, and/ or every year for the bond. A new client application form is not required for each contribution nor every year for the bond.

Unused entitlement to grant and bond for the last ten years will be calculated automatically. The Government of Canada's matching rate will be the same as the one that would have applied if the contribution had been made in the year in which the grant entitlement was earned. The matching rate is paid in descending order, using up any grant entitlements (beginning with the oldest year or entitlement) at the highest available matching rate first, followed by those at lower rates to which the beneficiary is entitled.

Up to and including the year that the beneficiary turns 18 years of age, the family income of the primary caregiver is used to determine the annual grant and bond entitlement (unless the beneficiary is under the care of a public department, agency, or institution legally authorized to act on behalf of the beneficiary and where the organization receives at least one payment in respect of the beneficiary under the *Children's Special Allowances Act*). Taxpayer information for the primary caregiver must be submitted on an annual basis to the Canada Revenue Agency (CRA) in order for the full eligible amount of grant and bond to be paid, as applicable, otherwise, bond payments will not be issued, and the maximum matching rate for grant will be limited to 100% of contributions up to \$1,000 each year.

Consent to use, share, and disclose the personal information of the primary caregiver(s) is required in order to determine the amount of grant and bond for each year that the entitlement was generated. **Annex B – Primary Caregiver** (ESDC-EMP5610) provides additional details and will need to be completed to ensure that the information for the years up to when the beneficiary turns 18 is available to determine the amount of grant and bond.

Starting in the year that the beneficiary turns 19 years of age and each year after this, the beneficiary's taxpayer information held by the CRA is used to verify family income, as well as validate eligibility criteria. This is true regardless of whether the beneficiary resides with or continues to receive support from their parents or guardians. Without updated taxpayer information, the maximum matching rate for the grant will be limited to 100% of contributions up to \$1,000 each year.

Should the plan holder ever wish to opt-out of receiving or discontinue payments of the grant and/or the bond into the beneficiary's RDSP, the 'Revocation of Request for Canada Disability Savings Grant and/or Canada Disability Savings Bond' form available at the issuer's place of business must be completed, signed (or consented to in an accepted manner), and given to the issuer.

## 7 Your Privacy Rights

This section explains why your information is collected and how it is used, shared and protected. It also explains how you can access your personal information.

The personal information you provide on this form is collected under the authority of the *Department of Employment and Social Development Act* (DESDA), the *Canada Disability Savings Act* (CDSA) and the *Income Tax Act* (ITA) for the purposes of determining eligibility, calculating amounts payable and administering the Canada Disability Savings Grant (grant) and/ or the Canada Disability Savings Bond (bond). Information may be used by and shared between Employment and Social Development Canada (ESDC), the Canada Revenue Agency (CRA), and the issuer for the administration of the CDSA and the ITA.

The Social Insurance Number (SIN) is collected under the authority of the CDSA and the ITA in accordance with the Treasury Board Secretariat Directive on Social Insurance Number. The SIN will be used as a file identifier and to ensure an individual's exact identification so that the beneficiary's eligibility for the Disability Tax Credit (DTC), residency and family income can be verified for the purposes of determining whether a grant or bond may be paid. While eligibility for the DTC may be verified, information contained within the Disability Tax Credit Certificate (i.e., the nature of the beneficiary's disability) will not be collected, used nor disclosed.

Where the beneficiary is not of the age of the majority, and/or does not have legal capacity, the holder authorizes the collection, use, and sharing of the beneficiary's personal information for this purpose.

Though you are not obligated to provide any personal information, refusal to do so will mean that ESDC will be unable to process your application.

The information you provide may be used and/or disclosed by ESDC for policy analysis, research and/or evaluation purposes. Personal information may also be disclosed to Statistics Canada for research and statistical purposes. However, these additional uses and/or disclosures of your personal information will never result in an administrative decision made about you (such as a decision on your entitlement to a grant and/or bond).

Once under the control of ESDC, your personal information is administered in accordance with the DESDA, the ITA, the CDSA, the *Privacy Act*, and all other applicable laws. You have the right to access or request correction to your personal information, which is described in Personal Information Bank "ESDC PPU 038". Instructions for obtaining this information are outlined in the government publication entitled [Info Source](#), which is available at [Canada.ca/infosource-ESDC](http://Canada.ca/infosource-ESDC). *Info Source* may also be accessed online at any Service Canada Centre.

You have the right to file a complaint with the [Privacy Commissioner of Canada](#) if you have concerns about the handling of your personal information. Additional information is available at [www.priv.gc.ca/en](http://www.priv.gc.ca/en)

**8****Definitions**

These definitions are provided for your information only and do not constitute the legal definitions. In the event of a discrepancy, the legal definitions found in the *Canada Disability Savings Act*, and the *Income Tax Act* prevail

**Beneficiary:** The individual who will receive payments from the RDSP.

**Disability Tax Credit (DTC):** A non-refundable tax credit available to individuals who, in a given taxation year, have one or more severe and prolonged impairments in physical or mental functions. A medical practitioner, using the appropriate form, must certify the effects of the impairment and the Canada Revenue Agency must approve the application. See the *Income Tax Act*, section 118.3 for further details.

**Government file:** The government file refers to any information collected under the authority of the DESDA, the CDSA, and the ITA for the purposes of determining eligibility for a Canada Disability Savings Grant (grant) or Canada Disability Savings Bond (bond), to calculate amounts payable and to administer the CDSA and the ITA. Such information may be held by ESDC and CRA.

**Holder:** Is an individual, agency, department or institution that opens an RDSP, names a beneficiary and authorizes or makes deposits (contributions) on behalf of the designated beneficiary into the RDSP. The plan holder may be the beneficiary, provided the beneficiary is of the age of majority and has legal capacity to sign (or provide consent in an accepted manner to the issuer) for themselves.

**Issuer:** A corporation authorized to offer the RDSP to the public. The issuer opens an RDSP for the holder on behalf of a designated beneficiary and handles related administrative matters.

**Primary caregiver:** For the purpose of the grant and the bond, the primary caregiver is/ are the person(s) eligible for the Canada Child Benefit (CCB) and whose name appears on CCB payments. Alternately, it may be the department, agency or institution that receives the allowance payable under the Children's Special Allowances Act. In cases of joint custody or a change in custody, there may be more than one primary caregiver for any given year(s) or part thereof. Similarly, there may be circumstances where the beneficiary was in the care of a department, agency, or institution for any given year(s) or part thereof.

**Where to get more information about the Canada Disability Savings Grant and Canada Disability Savings Bond:**

Phone: 1 800 O Canada (1 800 622-6232); 1-800-926-9105 (TTY)

E-mail: [rdsp-reei@hrsdc-rhdcc.gc.ca](mailto:rdsp-reei@hrsdc-rhdcc.gc.ca) Internet: [www.canada.ca/rdsp](http://www.canada.ca/rdsp)

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## ANNEX A – Joint Holder

### APPLICATION FOR: Canada Disability Savings Grant and/or Canada Disability Savings Bond

Instructions:

1. This form is to be completed for each joint holder of the Registered Disability Savings Plan (RDSP) that was not identified on the *Application for Canada Disability Savings Grant and/or Canada Disability Savings Bond* (EMP5608) to apply for the Canada Disability Savings Bond and/or Canada Disability Savings Grant on behalf of the designated beneficiary.
2. Read this document carefully. If you have any questions, do not hesitate to ask the RDSP issuer.
3. This form is valid only if completed, signed (or consent is provided to the issuer in an accepted manner), dated and given to the RDSP issuer. **Do NOT send directly to Employment and Social Development Canada.** Keep a copy for your records.

Beneficiary's Last Name	Beneficiary's First Name	Beneficiary's Middle Name	RDSP Contract No.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### A-1 Information About the Joint Holder

**Joint Holder**

Complete the following information if you are also a holder of the RDSP.

- The name must be entered exactly as it appears on Social Insurance Number documentation

You are a joint holder if you share responsibility for having opened an RDSP, naming a beneficiary and authorizing or making deposits (contributions) on behalf of the beneficiary into the RDSP.

Last Name	First Name	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Social Insurance Number (999 999 999)

### A-2 Declaration and Consent of the Joint Holder

You must read this section and sign (or provide consent to the issuer in an accepted manner) to receive grants and bonds in the RDSP.

I authorize the issuer to apply for the grant and/or bond on behalf of the designated beneficiary.

I confirm that the designated beneficiary (listed in Section 1 of the Application for the Canada Disability Savings Grant and/or the Canada Disability Savings Bond) meets all eligibility criteria identified in Section 5.1 of said form.

If I indicated in Section A-1 that I am a joint holder for the designated beneficiary, I confirm that I am this individual and I consent to the use and sharing of the beneficiary's personal information as long as they are less than the age of majority or do not have legal capacity.

If the joint holder is also a primary caregiver, Annex B must be completed.

I understand that the Privacy Act gives me the right to access or request correction to my personal information kept in the government file and as the authorized representative to do so for the beneficiary (if applicable, and provided the beneficiary is less than the age of majority or lacks legal capacity).

I confirm that I have read and understood this document, including my privacy rights found in Section A-3, and I have received a copy of this document. I consent to the use and sharing of my personal information. I certify that the information provided on this form is accurate to the best of my knowledge.

Date (YYYY-MM-DD)	Joint Holder's Signature
<input type="text"/>	<input type="text"/>

### A-3 Your Privacy Rights

This section explains why your information is collected and how it is used, shared and protected. It also explains how you can access your personal information.

The information you provide on this form is collected under the authority of the *Department of Employment and Social Development Act* (DESDA), the *Canada Disability Savings Act* (CDSA) and the *Income Tax Act* (ITA) for the purposes of determining eligibility for a Canada Disability Savings Grant (grant) or Canada Disability Savings Bond (bond), for the current year and if there are any unused grant and/or bond entitlements from prior years, to calculate amounts payable and to administer the grant and the bond. Information may be shared with Employment and Social Development Canada (ESDC), the Canada Revenue Agency (CRA), and the issuer for the administration of the CDSA and the ITA.

The Social Insurance Number (SIN) is collected under the authority of the CDSA and the ITA in accordance with the Treasury Board Secretariat Directive on the Social Insurance Number. The SIN will be used as a file identifier and to ensure an individual's exact identification so that the beneficiary's eligibility for the Disability Tax Credit (DTC), residency and family income can be verified for the purposes of determining whether a grant or bond may be paid. While eligibility for the DTC may be verified, information contained within the Disability Tax Credit Certificate (i.e., the nature of the beneficiary's disability) will not be collected, used nor disclosed.

Where the beneficiary is not of the age of majority, and/or does not have legal capacity, the holder authorizes the collection, use, and sharing of the beneficiary's personal information for this purpose.

Though you are not obligated to provide any personal information, refusal to do so may result in ESDC being unable to determine eligibility for the full amount of grant or bond in respect of the beneficiary.

The information you provide may be used and/or disclosed within ESDC for policy analysis, research and/or evaluation purposes. Information may also be disclosed to Statistics Canada for research and statistical purposes. However, these additional uses and/or disclosures of your personal information will never result in an administrative decision made about you, (such as a decision on your entitlement to a grant and/or bond).

Once under the control of ESDC, your personal information is administered in accordance with the DESDA, the ITA, the CDSA, the *Privacy Act*, and all other applicable laws. You have the right to access or request correction to your personal information, which is described in Personal Information Bank "ESDC PPU 038". Instructions for obtaining this information are outlined in the government publication entitled *Info Source* which is available at [Canada.ca/infosource-ESDC](http://Canada.ca/infosource-ESDC). *Info Source* may also be accessed online at any Service Canada Centre. You have the right to file a complaint with the Privacy Commissioner of Canada if you have concerns about the handling of your personal information.

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This form is available in alternate formats



These definitions are provided for your information only and do not constitute the legal definitions. In the event of a discrepancy, the legal definitions found in the *Canada Disability Savings Act*, and the *Income Tax Act* prevail.

**Beneficiary:** The individual who will receive payments from the RDSP.

**Disability Tax Credit (DTC):** A non-refundable tax credit available to individuals who, in a given taxation year, have one or more severe and prolonged impairments in physical or mental functions. A medical practitioner, using the appropriate form, must certify the effects of the impairment and the Canada Revenue Agency must approve the application. See the *Income Tax Act*, section 118.3 for further details.

**Government file:** The government file refers to any information collected under the authority of the DESDA, the CDSA, and the ITA for the purposes of determining eligibility for a Canada Disability Savings Grant (grant) or Canada Disability Savings Bond (bond), to calculate amounts payable and to administer the CDSA and the ITA. Such information may be held by ESDC and CRA.

**Holder:** Is an individual, agency, department or institution that opens an RDSP, names a beneficiary and authorizes or makes deposits (contributions) on behalf of the designated beneficiary into the RDSP. The plan holder may be:

- The beneficiary;
- If the beneficiary is not of the age of majority at the time the RDSP is opened and/or lacks legal capacity, the legal parent, legal representative, or public department, agency, or institution that is legally authorized to act on behalf of the beneficiary;
- If the beneficiary is of the age of majority at the time the RDSP is opened but does not have legal capacity, the legal representative, public department, agency, or institution that is legally authorized to act on behalf of the beneficiary; or
- If the RDSP is opened before 2024 and the beneficiary is of the age of majority at the time the RDSP is opened but the issuer, after a reasonable enquiry, has doubts regarding the beneficiary's legal capacity and no person or entity has been legally authorized to act on their behalf, the spouse, common-law partner or parent of the beneficiary missing currently [(also referred to as a qualifying family member [see s. 146.4(1) *Income Tax Act* for further details)].

**Issuer:** A corporation authorized to offer the RDSP to the public. The issuer opens an RDSP for the holder on behalf of a designated beneficiary and handles related administrative matters.

**Joint Holder:** A joint holder is simply more than one plan holder be it a combination of an individual, agency, department or institution that opens an RDSP, names one beneficiary and authorizes or makes deposits (contributions) on behalf of the beneficiary into the RDSP.

**Primary caregiver:** For the purpose of the grant and bond, the primary caregiver is/ are the person(s) eligible for the Canada Child Benefit (CCB) and whose name appears on CCB payments. Alternately, it may be the department, agency or institution that receives the allowance payable under the *Children's Special Allowances Act*. In cases of joint custody or a change in custody, there may be more than one primary caregiver for any given year(s) or part thereof. Similarly, there may be circumstances where the beneficiary was in the care of a department, agency, or institution for any given year(s) or part thereof.

**Where to get more information about the Canada Disability Savings Grant and Canada Disability Savings Bond:**

Phone: 1 800 O Canada (1 800 622-6232); 1-800-926-9105 (TTY)

E-mail: [rdsp-reei@hrsdc-rhdcc.gc.ca](mailto:rdsp-reei@hrsdc-rhdcc.gc.ca) Internet: [www.canada.ca/rdsp](http://www.canada.ca/rdsp)

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### ANNEX B – Primary Caregiver

## APPLICATION: Canada Disability Savings Grant and/or Canada Disability Savings Bond

Instructions:

1. This form is to be used to determine whether the designated beneficiary is eligible to receive payments for the Canada Disability Savings Grant and/ or the Canada Disability Savings Bond, to calculate amounts payable and to administer the grant and bond for the years in which the designated beneficiary is or was 18 years of age or under.
2. Complete this form if the beneficiary is 18 years of age or under at the time of the application or was 18 years or under during any part of the ten-year period prior to the application, if the beneficiary was eligible for the Disability Tax Credit for any of those years.
3. A separate form is to be completed for each primary caregiver.
4. The personal information of the primary caregiver from previous years is used to determine if the beneficiary is entitled to any grant or bond from those years. **All** primary caregivers for **each** of these years will need to complete an Annex B.
5. Read this document carefully. If you have any questions, do not hesitate to ask the Registered Disability Savings Plan (RDSP) issuer.
6. This form is valid only if completed, signed (or consent is provided to the issuer in an accepted manner), dated and given to the issuer. **Do NOT send directly to Employment and Social Development Canada.** Keep a copy for your records.

Beneficiary's Last Name	Beneficiary's First Name	Beneficiary's Middle Name	RDSP Contract No.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### B-1 Information about the Primary Caregiver

Complete this section if:

- you **are/ were** a primary caregiver of the beneficiary; or
- you **are/ were** representing an agency in the case where the beneficiary is/ was a child in care and a payment under the *Children's Special Allowances Act* was made in at least one month in the calendar year for any year that the beneficiary was 18 years or younger within the last ten years.

Primary Caregiver

You are a **primary caregiver** if you are/ were the person eligible for the Canada Child Benefit (CCB) and whose name appears on the CCB payments.

For more information please refer to B-4.

The name must be entered exactly as it appears on Social Insurance Number or Business Number documentation.

Last Name	First Name	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of Agency	Name of Agency Representative
<input type="text"/>	<input type="text"/>

Social Insurance Number / Business Number (if an Agency)

Note: the Social Insurance Number contains nine digits (999 999 999) and the Business Number contains fifteen alphanumeric characters (999 999 999 TX 9999)

### B-2 Declaration and Consent of the Primary Caregiver

Complete this section if you are an individual not representing an agency.

You must read this section and sign (or provide consent in an accepted manner), in order for the beneficiary's RDSP to receive grants and bonds

I confirm that the designated beneficiary listed above meets all eligibility criteria identified in Section 5.1 of the Application form for the Canada Disability Savings Grant and/or Canada Disability Savings Bond, and I agree to inform the issuer if, at any time, there is a change in the beneficiary's circumstances.

I confirm that I have read, and understood this document, including my privacy rights found in Section B-4, I have received a copy of this document, and I consent to the use and sharing of my personal information. I certify that the information provided on this form is accurate to the best of my knowledge.

Date (YYYY-MM-DD)	Primary Caregiver's Signature
<input type="text"/>	<input type="text"/>

### B-3 Agency Attestation

Complete this section if you are representing the agency that received a payment made under the *Children's Special Allowances Act* in respect of the beneficiary in at least one month in the calendar year(s).

If applicable, this attestation must be completed in order for the beneficiary's RDSP to receive grants and bonds.

I confirm that the agency identified above was issued a payment under the *Children's Special Allowances Act* in the current calendar year, or if applicable, in the previous calendar year(s) [please specify]:

Date (YYYY-MM-DD)	Signature of Agency Representative
<input type="text"/>	<input type="text"/>



**B-4****Your Privacy Rights**

This section explains why your information is collected and how it is used, shared and protected. It also explains how you can access your personal information.

*The use of the singular (such as primary caregiver) also includes plural as the context requires.*

The personal information you provide on this form is collected under the authority of the *Department of Employment and Social Development Act* (DESDA), the *Canada Disability Savings Act* (CDSA) and the *Income Tax Act* (ITA) for the purposes of determining eligibility for a Canada Disability Savings Grant (grant) or Canada Disability Savings Bond (bond) for the current year (if applicable) and if there are any unused grant and/or bond entitlements from prior years, to calculate amounts payable and to administer the grant and bond including for the years in which the beneficiary is or was 18 years of age or under. Information may be used by and shared between Employment and Social Development Canada (ESDC), the Canada Revenue Agency (CRA), and the issuer for the administration of the CDSA and the ITA.

The Social Insurance Number (SIN) is collected under the authority of the CDSA and the ITA in accordance with the Treasury Board Secretariat Directive on Social Insurance Number. The SIN will be used as a file identifier and to ensure an individual's exact identification so that the beneficiary's eligibility for the Disability Tax Credit (DTC), residency and family income can be verified for the purposes of determining whether a grant or a bond may be paid. While eligibility for the DTC may be verified, information contained within the Disability Tax Credit Certificate (i.e., the nature of the beneficiary's disability) will not be collected, used nor disclosed.

Personal information on the primary caregiver is used to verify their identity in the Social Insurance Registry in order to determine the correct RDSP and for the purposes of determining the amount of grant and/or bond for the years in which the beneficiary is/was 18 years of age or under.

Personal information on the primary caregiver is also used to determine the family income for a particular year, as well as to validate the beneficiary's residency and eligibility for the DTC. Family income for any given year is based on taxpayer information submitted two years prior (for example, family income for determining 2020 bond entitlement is based on the 2018 tax year). Your taxpayer information held by the CRA is used to determine the family income as well as validate the beneficiary's Disability Tax Credit eligibility and the beneficiary's residency.

As the beneficiary may be eligible for unused grant and bond entitlements from the previous ten years, the personal and taxpayer information of the primary caregiver is used to determine eligibility for any year in which the beneficiary was 18 years of age or under. As a result, the use and sharing of personal and taxpayer information may extend as far back as twelve years (the previous ten years for unused grant and bond entitlements, plus two years prior for family income based on income tax records).

Though you, as a primary caregiver who does not represent an agency, are not obligated to provide any personal information, refusal to do so, may result in ESDC being unable to determine eligibility for the full amount of grant or bond in respect of the beneficiary.

The personal information you provide may be used by and shared between the following parties for the administration of the CDSA and the ITA: ESDC, the CRA, the RDSP provider and its agents, and between RDSP providers when transferring RDSP assets.

Information may be used and/or disclosed by ESDC for policy analysis, research and/or evaluation purposes. Information may also be disclosed to Statistics Canada for research and statistical purposes. However, these additional uses and/or disclosures of your personal information will never result in an administrative decision being made, (such as a decision on the beneficiary's entitlement to a grant and/or a bond).

Once under the control of ESDC, your personal information is administered in accordance with the DESDA, the ITA, the CDSA, the Privacy Act, and all other applicable laws. You have the right to access and request correction to, your personal information, which is described in Personal Information Bank "ESDC PPU 038". Instructions for obtaining this information are outlined in the government publication entitled *Info Source*, which is available at [Canada.ca/infosource-ESDC](http://Canada.ca/infosource-ESDC). *Info Source* may also be accessed online at any Service Canada Centre. You have the right to file a complaint with the Privacy Commissioner of Canada if you have concerns about the handling of your personal information.

**B-5****Definitions**

**Beneficiary:** The individual who will receive payments from the RDSP.

**Disability Tax Credit (DTC):** A non-refundable tax credit available to individuals who, in a given taxation year, have one or more severe and prolonged impairments in physical or mental functions. A medical practitioner, using the appropriate form, must certify the effects of the impairment and the Canada Revenue Agency must approve the application. See the *Income Tax Act*, section 118.3 for further details.

**Family Income:** Family income is used to determine the amount of grant and bond a beneficiary is eligible for and is generally established from the information of the primary caregiver who received the first Canada Child Benefit (CCB) payment of the year (usually in January). There are circumstances where the information of the primary caregiver who is currently receiving the CCB is used instead (if this is different from the primary caregiver who received the CCTB for January) – please identify both individuals if this applies. ESDC uses the family income that is most beneficial to the beneficiary to determine the amount of grant and bond.

**Holder:** Is an individual, agency, department or institution that opens an RDSP, names a beneficiary and may authorize or make deposits (contributions) on behalf of the designated beneficiary into the RDSP. The plan holder may be the beneficiary provided the beneficiary is of the age of majority and has legal capacity to sign (or provide consent in an accepted manner to the issuer) for themselves.

**Issuer:** A corporation authorized to offer the RDSP to the public. The issuer opens an RDSP for the holder on behalf of a designated beneficiary and handles related administrative matters.

**Primary Caregiver:** For the purpose of the grant and bond, the primary caregiver is/ are the person(s) eligible for the Canada Child Benefit (CCB) and whose name appears on the CCB payments. Alternately, it is the department, agency or institution that receives the allowance payable under the *Children's Special Allowances Act*. In cases of joint custody or a change in custody, there may be more than one primary caregiver for any given year(s) or part thereof. Similarly, there may be circumstances where the beneficiary was in the care of a department, agency, or institution for any given year(s) or part thereof.

These definitions are provided for your information only and do not constitute legal definitions.

In the event of a discrepancy, the legal definitions found in the *Canada Disability Savings Act*, and the *Income Tax Act* prevail.

**Where to get more information about the Canada Disability Savings Grant and Canada Disability Savings Bond:**

Phone: 1 800 O Canada (1 800 622-6232); 1-800-926-9105 (TTY)  
E-mail: [rdsp-reei@hrsdc-rhdcc.gc.ca](mailto:rdsp-reei@hrsdc-rhdcc.gc.ca) Internet: [www.canada.ca/rdsp](http://www.canada.ca/rdsp)

Ce formulaire est disponible en français  
This form is available in alternate formats