

ANNUAL DUES WAIVER APPLICATION

To be eligible for a dues waiver, this form must be completed in full and the required documentation submitted with the application by **April 30th**. All waivers are valid for one year only and must be applied for annually. Please carefully read the Annual Dues Waiver Policy on the following page to ensure that you meet the conditions specified.

Name: _____ Member Number: _____

Current Employer: _____
(or, if unemployed, last employer)

Medical Leave *- 100% Since _____, I have been out of the workforce.
(mm/dd/yyyy)

During this time, I have earned less than \$25,000 (including vacation pay but not including severance payments, long term disability payments or unemployment insurance payments.)

Unemployment – 100% Since _____, I have been out of the workforce.
(mm/dd/yyyy)

During this time, I have earned less than \$25,000 (including vacation pay but not including severance payments or unemployment insurance payments).

Family Leave – 100% Since _____, I have been on family leave.
(mm/dd/yyyy)

During this time, I have earned less than \$25,000 (including vacation pay but not including severance payments or unemployment insurance payments).

Full Time Education Leave * - 50% Since _____, I have been enrolled full time in a degree-granting program.
(mm/dd/yyyy)

During this time, I have earned less than \$25,000 (including scholarships and/or employer support but not including severance payments or unemployment insurance payments).

Other * - 50%
**Please provide the required documentation for processing (refer to next page).*

For all waiver applications, expected date of return to work, if known _____
(mm/dd/yyyy)

Please note that this does not mean there will be an exemption or reduction to the CPD requirement.

Under certain conditions members can request an exemption to the CPD requirement for a period of one year. The request must be made in writing to CPA PEI. Should the exemption be granted, the member is still required to undertake CPD activities for the remaining two years of the three-year period on a prorated basis. Please refer to the CPD policy.

By checking this box, I confirm that I have read the attached policy and qualify as per the conditions outlined.

Signature

Date (mm/dd/yy)

Year: _____	
Application Approved:	Yes No
Dues Waived %:	
Previous Deferrals:	

ANNUAL DUES WAIVER POLICY

Members may apply for a reduction in the amount of their annual membership dues if they qualify under one of the following categories.

1. Medical Leave: 100% of member dues upon annual completion of a Dues Waiver Application form confirming that the member:
 - Has a medical disability that results in the member being medically unable to work;
 - Submits correspondence from their doctor, or insurance company confirming their status;
 - Has earned less than \$25,000 (not including severance payments, long term disability payments or unemployment insurance payments).

2. Unemployment: 100% of member dues upon annual completion of a Dues Waiver Application form confirming that the member:
 - Has been unemployed for a period of at least six consecutive months immediately prior to the issuance of the annual member dues notice.
 - Is currently unemployed;
 - Is available and searching for work.
 - Has earned less than \$25,000 (including vacation pay but not including severance payments or unemployment insurance payments).

3. Family Leave: 100% of member dues upon annual completion of a Dues Waiver Application form confirming that the member:
 - Is presently unemployed or on maternity / parental leave from their employer, in order to provide care for a family member for an uninterrupted period of no less than one year and no more than five years. For purposes of this waiver, family includes spouse, children, siblings, parents, or parents-in-law;
 - Does not intend to seek employment in the ensuing twelve months.
 - Has earned less than \$25,000 (including vacation pay but not including severance payments or unemployment insurance payments).

4. Full Time Education Leave: 50% of member dues upon annual completion of a Dues Waiver Application form confirming that the member:
 - Is in full-time attendance in a degree program for at least two consecutive terms in a recognized university that leads to a degree, certificate or diploma;
 - Has earned less than \$25,000 (including scholarships, employer support but not including unemployment insurance payments).

5. Other: Up to 50% of member dues upon annual completion of a Dues Waiver Application form who, in the judgment of the Board, are unable to meet their dues obligations but whose circumstances are not covered by any of the above categories. Please note that the application must provide details supporting a financial hardship claim.

By agreement with CPA Canada, any waiver granted by the provincial office is also applicable to the national portion of the member fee.