

Where to get and submit a monthly report form?

Online

- Complete and submit using My Self Serve myselfserve.gov.bc.ca
- Print one from the ministry website at gov.bc.ca/IncomeAssistanceMonthlyReport and submit to a ministry office or by mail

Call 1-866-866-0800

- Complete and submit the report using the self-serve option; press 5
- Speak to a ministry worker who can mail you a paper form and you can submit it back to a ministry office or by mail

In-person

- Complete the monthly form on the bottom of your monthly assistance cheque or EFT notification and drop off to an in-person ministry office
- Request a blank form from a ministry office or Service BC Office that provides our services, complete it and drop off at an in-person office

Mail

- You can mail your completed monthly form instead of dropping it off

When to report and important timelines

Your monthly report should include information related to the previous month. For example, the report you submit on Feb. 5 should include information and changes that took place in January. In this example, the changes reported may impact your March assistance which is issued in late February.

For more information

- » Visit www2.gov.bc.ca/gov/content/governments/policies-for-government/bcea-policy-and-procedure-manual/eligibility/monthly-reporting-requirements
- » Call the Ministry of Social Development and Poverty Reduction toll-free: 1-866-866-0800
- » Access income and disability assistance services online at myselfserve.gov.bc.ca

Reminder: A delay in your assistance payment could occur if your monthly report is missing information, you made a mistake in a declaration, or submit after the 5th day of the month. For monthly reports missing information, you may be asked to resubmit or correct your monthly report.

How to complete your monthly report



What is a monthly report?

The monthly report lets the ministry know you're still in need of assistance and if there are any changes to your circumstances. Ministry staff may verify the information you provide with private, provincial and federal agencies.

A "change in circumstance" can include, but is not limited to:

- Family composition — e.g. add or remove a spouse or dependent
- Income — e.g. monthly employment income or lump sum payments (such as ICBC or a settlement)
- Assets
- Temporarily being out of province

For recipients of income or hardship assistance

A monthly report needs to be submitted each month as the ministry uses this information to determine your eligibility and the amount of your next assistance payment. This report should be submitted by the 5th of every month.

For recipients of disability assistance, those in the Persons with Persistent Multiple Barrier s (PPMB) category, or persons in an approved special care facility

The monthly report should be submitted by the 5th of the month when there is a change in your circumstances or income to declare from the previous month.

For disability assistance recipients only, if you no longer receive disability assistance because your total earnings for the year are more than your Annual Earnings Exemption, continue submitting your monthly report each month.

Part 1: Answer each question by ticking either the "Yes" or "No" box.

If applicable, your spouse is required to complete as well.

Monthly report is due by the fifth of the month.

Part 2: Declare all net income and submit proof (e.g., pay statements). Enter the dollar amount or 0 for each line.

If applicable, your spouse is required to complete as well.



Monthly Report
Avoid delays, submit by the 5th



Ministry of
Social Development
and Poverty Reduction



Notice: Information on this form is collected under the authority of the Employment and Assistance Act and Regulation and the Employment and Assistance for Persons with Disabilities Act and Regulation and will be used for verification of continuing eligibility for assistance. The accuracy of the information provided on this form will be checked by comparing it against information held by other provincial, federal and private agencies. Collection, use and disclosure of the information is as authorized by the Freedom of Information and Protection of Privacy Act. If you have questions about the collection, use or disclosure of this information, contact the ministry.

1. Since your last declaration:

Are you still in need of assistance? Yes No

Has your family unit received or disposed of any assets? Yes No

Any changes to your shelter costs? Yes No

Any changes in Dependents or Persons living in the home? Yes No

	Applicant	Spouse
Any employment changes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you attending / enrolled in school or training?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you looking for work?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you moved or entered a facility?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Any outstanding warrants for your arrest?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please explain all changes including income and submit proof:

2. Declare all income and submit proof. Enter "0" if none.

	Applicant	Spouse
Net Employment Income	\$	\$
Employment Insurance	\$	\$
Spousal Support / Alimony	\$	\$
Child Support	\$	\$
WorkBC Financial Support	\$	\$
Student Funding (eg. Loans, Bursaries)	\$	\$
Rental Income	\$	\$
Room / Board Income	\$	\$
Worker's Compensation	\$	\$
Private Pensions (eg. Retirement, Disability)	\$	\$
OAS / GIS	\$	\$
Trust Income	\$	\$
Canada Pension Plan (CPP)	\$	\$
Tax Credits (eg. GST Credit)	\$	\$
Child Tax Benefits	\$	\$
Income Tax Refund	\$	\$
All other income / money received	\$	\$
Income of Dependent Children	\$	\$

3. Declaration: I understand that the ministry may disclose this information to verify continuing eligibility for assistance under the above Acts and Regulations. I declare that all of the information provided on this form to the Ministry of Social Development and Poverty Reduction is true and complete.

Applicant Signature	Date (yyyy-mm-dd)	Spouse Signature	Date (yyyy-mm-dd)
Applicant Print Name		Spouse Print Name	
Applicant Telephone	Social Insurance Number	Spouse Telephone	Social Insurance Number

NEXT CHEQUE IS DUE

BEST MONTH	TOTAL ALLOWANCE	SHELTER PORTION	INCOME DECLARED	INCOME DEDUCTED	OTHER DEDUCTIONS	TOTAL CHEQUE
CASE	CASELOAD					

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You can provide more information about any of the questions answered above. If you are not sure if your change is a change in circumstance, include it here.