CUPE LOCAL 3906
CANADIAN UNION OF PUBLIC EMPLOYEES - MCMASTER ACADEMIC & RESIDENCE WORKERS
Tel: 905-525-9140 ext. 24003 **Fax:** 905-525-3837 **Email:** staff@cupe3906.org
McMaster University, Kenneth Taylor Hall B111, 1280 Main St W, Hamilton, ON, L8S 4M4

Unit 1 (Tas/Ras in Lieu)

Childcare Rebate Claim Form

Please type or print clearly

Please include: Receipts for Childcare Payment. (Claims cannot be paid without this documentation.)

CLAIMANT INFORMATION:

LAST or FAMILY NAME: **FIRST NAME:**

HOME or CELL PHONE NUMBER: **EMAIL ADDRESS:**

McMASTER UNIVERSITY EMPLOYEE (STUDENT) NUMBER:

AMOUNT OF CURRENT CLAIM **(Please note: Current maximum is $450/academic year)**

REASON FOR CLAIM:

FOR REIMBURSEMENT CHEQUE—PLEASE SELECT ☑ ONE OPTION:

☐ 1. Please mail my cheque to me at my home address shown below:

OR

☐ 2. Please mail my cheque to:
KTH B111, McMaster University
1280 Main Street W
Hamilton, ON L8S 4M4

EMPLOYMENT INFORMATION:

DEPARTMENT CURRENTLY/MOST RECENTLY EMPLOYED BY:

POSITION CURRENTLY/MOST RECENTLY HELD: ☐ **TA** ☐ **RA (IN LIEU OF TA)**

TERM(S) EMPLOYED THIS ACADEMIC YEAR: ☐ **FALL** ☐ **WINTER** ☐ **SPRING/SUMMER** ☐ **N/A**

IF YOU SELECTED N/A, WHEN WERE YOU LAST EMPLOYED AS A TA/RA (IN LIEU)?

Eligibility determined by academic year (i.e., September 1-August 31)

Send claim form and receipts to:
claims@prosure-group.com
or mail to...

Prosure Group Administrators Ltd.
2255 Sheppard Ave East
Suite 202, Atria 1
Toronto, Ontario M2J 4Y1

OR

CUPE Local 3906
KTH B111, McMaster University
1280 Main St. W.
Hamilton, ON L8S 4M4

Please contact the Prosure Group with questions 416-609-0989 or contact administrator@cupe3906.org

Please sign and date: I submit this claim with the knowledge that any false information may result in my immediate disqualification from this benefit plan and may result in further legal action.

Signature: **Date:**