

Separation - Divorce

Date of separation (yyyy/mm/dd): _____ **Date of divorce** (yyyy/mm/dd): _____

Have you paid alimony during the year for the benefit of your **former spouse**? Yes No Amount: _____

If yes, please indicate: Name: _____ S.I.N.: _____

If there was a separation and/or divorce during the year, please provide us with a copy of the agreement or court document.

	CHILD 1	CHILD 2
First name:	_____	_____
Name:	_____	_____
Date of birth:	_____	_____
S.I.N.:	_____	_____
Address (if different from yours)	_____	_____
For each child, please indicate who has legal custody of the child:	<input type="radio"/> You <input type="radio"/> Former spouse <input type="radio"/> Shared	<input type="radio"/> You <input type="radio"/> Former spouse <input type="radio"/> Shared
If there was a change in the legal custody during the year, please provide the date of the change:	From _____ To _____	From _____ To _____
If you paid child support during the year, please provide the amount paid:	\$ _____	\$ _____
If you have shared custody and neither parent pays child support , please indicate which parent is taking which child as an eligible dependant for tax purposes (please ensure this has been agreed upon with your former spouse)	<input type="radio"/> You <input type="radio"/> Former spouse	<input type="radio"/> You <input type="radio"/> Former spouse
For each eligible dependent child, please indicate the income earned during the year:		
a) employment income	\$ _____	\$ _____
b) scholarship and bursaries	\$ _____	\$ _____
c) investment income	\$ _____	\$ _____
d) other (please provide details)	\$ _____	\$ _____

In each case, please provide information slips or a copy of the income tax returns (if they are not prepared by us).

Separation - Divorce (cont'd)

2024

Did the child receive the Solidarity Tax Credit:

from January to June 2024? If yes, indicate the amount*: \$ _____

from July to December 2024? If yes, indicate the amount*: \$ _____

**Please note that you can simply provide us with the Revenu Québec statements indicating the amounts received for 2024.*

	CHILD 1	CHILD 2
Is the dependent child handicapped? <i>(If this is the first year the credit is being requested, please provide form T2201 duly signed by a qualified and authorized medical practitioner. If the child is 18 or over, also provide form TP-752.0.14)</i>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Is the child attending post-secondary school?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
If yes, please indicate to whom the tuition fees are to be transferred.	<input type="radio"/> You <input type="radio"/> Former spouse	<input type="radio"/> You <input type="radio"/> Former spouse

If your child is transferring tuition fees, please provide us with the T2202 and the Relevé 8 slips. Generally, these slips must be downloaded by the student from the school's website. If we do not prepare the child's income tax returns, please provide us with a copy.

