SUPPORT FOR CLAIMANT/APPLICANT

Form H

1.	App	olication for support for myself (amount and date)
		I am the Claimant/Applicant and ask for support for myself. I ask the Court to order support of per month starting as of (YYYY/MM/DD). (date). A Financial Statement (Form I) is included in my application.
		The Respondent agreed to pay support for me of (monthly or other amount): and has not paid the whole amount. There is now unpaid support of owing. Uritten agreement (attach) Verbal agreement Other
		Retroactive commencement date (if you have asked for support to start on a date earlier than the date of your application, explain why your application was not made earlier)
		☐ Additional page(s) attached
2.	Fa	cts about my claim (complete all that apply and add additional documents as necessary)
	ı	My application is based on the following facts:
		My date of birth is (YYYY/MM/DD):
		my date of bitting (1111/min/bb).
		I claim support from the Respondent based on the following grounds:
	L	Additional page(s) attached
		I am an adult child seeking support from a parent. I have completed and attached Form J based on my circumstances as the Respondent's child instead of completing the rest of this Form H.
		I have attached an excerpt of the law that says I am entitled as an adult child to claim support from a parent.
		The Respondent and I were married to each other.
		The Respondent and I were not married to each other but we were in a registered relationship with legal rights and obligations according to:
		(Specify the law under which your relationship was registered.)
		The Respondent and I were not married but we lived together as a couple. Our relationship was not registered but I believe I am entitled to claim support from the Respondent according to:
		(Specify the laws that say you are entitled to claim support. You may be entitled under the laws of your province or territory or under the law of another province territory, or country or under the law of more than one place. You may need to seek legal advice about this.)
		to
		Start date of relationship (YYYY/MM/DD) End of relationship (YYYY/MM/DD)

1. 2. 3. 4. (If there is a child support order/agreement, attach it.) There were children from a previous relationship living with the Respondent and me: Name (First Middle Last) Date of Birth (YYYY/MM// 2. 3. 4.	The marital statu	ring the time we were together, we separated for a total of	because: rs, months) n years and months)
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The Respondent and I lived together for a total of	The Re ☐ The Re ☐ 1. 2.	e Respondent and I lived together for a total of	n years and months) Single □ Other:
The Respondent and I did not have any children together. The Respondent and I have the following children together: Name (First Middle Last) Date of Birth (YYYY/MM// 1. 2. 3. 4. (If there were children from a previous relationship living with the Respondent and me: Yes No Name (First Middle Last) Date of Birth (YYYY/MM// Additional page(s) at the Respondent and me: Ad	The Re ☐ The Re ☐ 1. 2.	s is: Separated Divorced Married Common-law spondent and I did not have any children together. spondent and I have the following children together: Name (First Middle Last)	Single □ Other:
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Respondent.			at they were with you and th
	Respond	ent.	

	Name (First Middle Last)	Date of Birth (YYYY/MM/DD)
1.		
2.		
3.		
4.		
	(Attach an additional page if more	than 4 children.)
Date youngest chi	ild will start full time schooling:	
	Name (First Middle Last)	Date (YYYY/MM/DD)
Date youngest chi	ild is expected to complete high school:	
Date youngest chi	Name (First Middle Last)	Date (YYYY/MM/DD)
		Date (YYYY/MM/DD)
	Name (First Middle Last)	
The following child	Name (First Middle Last) dren are living with the Respondent:	
The following child	Name (First Middle Last) dren are living with the Respondent:	
The following child 1.	Name (First Middle Last) dren are living with the Respondent:	
The following child 1. 2. 3.	Name (First Middle Last) dren are living with the Respondent:	
The following child	Name (First Middle Last) dren are living with the Respondent:	Date of Birth (YYYY/MM/DD)

3. My

Level	Year Completed
College/University level or year completed:	
Program and Level	Year Completed
Other training/certificate/diploma received:	
Level	Year Completed

4. My work experience A. While with the Respondent: ☐ I did not work for pay while the Respondent and I were together. (If this statement applies, mark the box with an X, and go to Section 4.B.) ☐ During the time the Respondent and I were together, I worked for pay for a total of ☐ I have attached work history list with dates, employment, and monthly pay. My usual employment (occupation) was: I also worked as (other occupations): Additional page(s) attached ☐ If part-time, I worked an average of _____ hours per month. ☐ I worked less than full time, or did not work for pay, because (identify all reasons and time periods below): ☐ Additional page(s) attached B. Since the Respondent and I separated: ☐ I have not worked for pay at all or I work for pay and am unable to meet my needs because: Additional page(s) attached ☐ I have worked. I have attached a list of my work history including the dates of each employment and monthly pay.

education, re-location	ı, etc.):		 	•		-	

☐ I have taken the following steps to improve my ability to support myself (list the courses, job training,

5. Medical

	Ш	I am not able to fully support myself because of a medical condition, disability, or special need which keeps me from working:
		☐ I am only able to work less than full-time hours.
		☐ I am not able to work at all.
		Condition/Special Need
		(Attach documents or doctor's letter giving details.)
		I am not able to fully support myself because a child or other person has a medical condition, disability, or special need which keeps me from working:
		$\ \square$ I am only able to work less than full-time hours.
		☐ I am not able to work at all.
		Name of person:
	-	Relationship to me:
		Condition/Special Need:
		(Attach documents or doctor's letter giving details.)
6.	The	(Attach documents or doctor's letter giving details.) persent and the future
6.		
6.		e present and the future
6.		e present and the future As of the date of this application, I am: Not working.
6.		As of the date of this application, I am: Not working.
6.		e present and the future As of the date of this application, I am: Not working. Working full time. (Occupation, monthly income) Working part-time.
6.		As of the date of this application, I am: Not working. Working full time. (Occupation, monthly income) Working part-time. (Occupation, monthly income)
6.		As of the date of this application, I am: Not working. Working full time. (Occupation, monthly income) Working part-time. (Occupation, monthly income) Looking for work (attach job search list).
6.		As of the date of this application, I am: Not working. Working full time. (Occupation, monthly income) Working part-time. (Occupation, monthly income)
6.		As of the date of this application, I am: Not working. Working full time. (Occupation, monthly income) Working part-time. (Occupation, monthly income) Looking for work (attach job search list). Going to school.
6.		As of the date of this application, I am: Not working. Working full time. (Occupation, monthly income) Working part-time. (Occupation, monthly income) Looking for work (attach job search list).
6.		As of the date of this application, I am: Not working. Working full time. (Occupation, monthly income) Working part-time. (Occupation, monthly income) Looking for work (attach job search list). Going to school.
6.		As of the date of this application, I am: Not working. Working full time. (Occupation, monthly income) Looking for work (attach job search list). Going to school. (List the type of course, how long, where.) Receiving income or financial assistance from the following other source(s) (for example, social
6.		As of the date of this application, I am: Not working. Working full time. (Occupation, monthly income) Looking for work (attach job search list). Going to school. (List the type of course, how long, where.) Receiving income or financial assistance from the following other source(s) (for example, social

	My ot	other sources of income are (monthly) (check any that apply):							
		Rental of space/apartment in my home							
		Investment income (savings, GICs, bonds, property)							
		Support from a present spouse, or other former spouse (attach order	or agreement)						
		Other (attach pages giving details)							
	Compared to the time the Respondent and I were together, my standard of living has changed. (Please explain below why your standard of living is now better or worse than it was when living with the Respondent.)								
			☐ Additional page(s) attached						
	مماما	a to make any self celf comparing by (about any that apply)	Additional page(3) attached						
Ш	· _	n to make myself self-supporting by (check any that apply):							
		2 · · · · · · · · · · · · · · · · ·							
		- 11 1							
		☐ Obtaining employment							
	A.	Details of my plan include (List name of course, where offered, length of part time, costs, and results to be achieved. If the training/course has a attach it.)							
			Additional page(s) attached						
	B.	I expect when my plan is completed, my standard of living will change. your standard of living will be better or worse once your plan is compl							
			Additional page(s) attached						
	I will r	not be able to become self-supporting because:							
			Additional page(s) attached						
This	docun	ument is attached to and forms part of the evidence in my support/suppor	t variation application.						
		(Sign	ature of Claimant/Applicant)						