



# FEE ASSISTANCE FOR REFUGEE ESTABLISHMENT

*www.farefund.ca*

## INTAKE FORM

Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Date found to be a Convention Refugee or Protected Person: (attach copy of RPD decision)

\_\_\_\_\_

How many people will be included in the application in total?

Adult applicants \_\_\_\_\_

Minor applicants \_\_\_\_\_

Are you presently working?    yes    no

If yes, provide details:

\_\_\_\_\_  
\_\_\_\_\_

If no, are you on social assistance?    yes    no

[Please attach pay stubs or social assistance receipt]

Do you have family in Canada?

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Have you made any efforts to raise this money elsewhere? If so, where?

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How much could you contribute, if any?

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Are there other considerations the committee should know about?

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Referred by (include name and telephone number):

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Signature

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Date

Please submit by fax to:

416-977-5567

Please write on the cover sheet: Attention: FARE

You can also mail the application to:

FARE  
c/o Refugee Law Office  
375 University Avenue, Suite 206  
Toronto, Ontario M5G 2G1