

## SUBSIDY REQUEST APPLICATION

CISOC has a yearly budget allocated to help finance translation services. This means that CISOC <u>might cover a portion</u> of the fees to translate your documents. These funds are limited and are meant for individuals who may not have the ability to pay for these services on their own. To ensure there is enough funds to help those in need, please fill this application out only if you truly require the help. Please note that subsidy is based on an as needed basis and merely filling out this form does not guarantee approval. If approved, **subsidy is only granted one time per family**. Thank you.

## Your application cannot be processed if you fail to complete all of the required sections marked with an asterisk (\*).

Mr. 🗌 Ms. 🗌 Mrs. 🗌 *Firs	st Name:	*Surname:	
*Language of document:		*Target Language:	
*Phone Number:		Email Address:	
*Current Occupation:		*Annual Salary:	
*If unemployed, please spe	cify your source of income: _		
*If you replied 'Savings', ple	ease indicate your monthly b	udget:	
*Family Status:	*Family Size:	*Yearly Family Income:	
*Purpose of translation:			
•	nigration (PR cards, citizensh fy):	ip applications, etc.)	
*Have you or a family mem	ber previously received our s	subsidy?	
Who referred you to us? (Pl	ease specify):		
I hereby confirm that the a	bove information is true and	accurate to the best of my knowledge.	
Signature		Date	-
The completed application	form and the original docum	ents should be brought in person or scanned to:	
CISOC – Cultural Interpretat	tion Services for our Commu	nities	

CISOC – Cultural Interpretation Services for our Communities 100-44 Eccles Street, Ottawa, Ontario, K1R 6S4 translations@cisoc.net