

Child Support Enforcement Eligibility Form

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Maintenance Enforcement Program Telephone: 204-945-7133
 100-352 Donald St Winnipeg, MB R3B 2H8 Facsimile : 204-945-5449
 ManitobaMEPinquiries@gov.mb.ca Toll free in Canada: 1-866-479-2717

Manitoba MEP File:
 Support Recipient:
 Support Payor:
 Dependant:

Manitoba MEP needs information about your child's current circumstances to determine if they continue to be eligible for enforcement of child support. Please read the form carefully and ensure you answer all the questions.

A copy of this completed form and any information or documents you send us about the child **may** be provided to the support payor.

Do you still require ongoing support for the adult child? Yes No
 If no, what date was support no longer required: _____ Please sign and return the form. The MEP will end support as of the date provided.

If yes, please answer the following questions:

1. Does the adult child have a diagnosed illness or disability that in the opinion of the child's physician impacts the child's ability to work or attend school? Yes No
 If yes, is it: Permanent Temporary Expected date of recovery: _____

2. Is the adult child in school Yes No
 Type of Schooling: High School University/College Other _____

A. Please attach proof of full-time enrollment* and provide the following information:
 Term Start Date: _____ Term End Date: _____
 Anticipated completion date of child's diploma, program or degree: _____
 When completed will the child continue with further education? Yes No
 If Yes, please provide the anticipated start date: _____

*If the child is under 21 years of age and attending high school no proof of registration or enrollment is required.

B. If no, please provide:
 Date the adult child was last in school: _____
 Does the adult child intend to return to school: Yes No Unknown
 If yes, please provide:
 Term Start Date: _____ Term End Date: _____

C. Is the child on a wait list for school? Yes No Unknown
 If yes, please provide the anticipated start date: _____

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3. Where does the adult child reside?

- | | |
|---|---|
| <input type="checkbox"/> In my home | <input type="checkbox"/> Not in my home |
| <input type="checkbox"/> Away from my home to attend school | <input type="checkbox"/> With the support payor |

If the child is not living with you are you financially supporting the child? Yes No

4. Is the adult child working: Yes No

If yes: Full Time Part Time

5. Is the adult child married or soon to be married? Yes No

If yes, please provide the date: _____

Additional Information

Please provide any additional information that you would like MEP to consider:

I declare I am the creditor and the information provided is true. I understand I may be required to provide documentation to the Manitoba Maintenance Enforcement Program to support the answers on this form.

Signature: _____ Date: _____

You can return the required information by email to ManitobaMEPinquiries@gov.mb.ca provided you include information that confirms your identity (file number and PIN). If you prefer, fax or mail the completed form to the address or fax number indicated above.