Print Form

Employment and Social Development Canada | Emploi et Développement social Canada

To be completed by the receiving promoter
FOR ADMINISTRATIVE USE ONLY

REGISTERED EDUCATION SAVINGS PLAN (RESP) TRANSFER FORM
Part B: Receiving promoter

1 Information about the receiving promoter

Promoter's name		
Address		
City	Province/Territory	Postal code
Contact name		Telephone number

2 Information about the receiving RESP

Specimen plan number	Contract number	RESP type ☐ Individual ☐ Family ☐ Group
Subscriber's family name **or** Agency name		Subscriber's given name
Joint subscriber's family name (if applicable)		Joint subscriber's given name

3 Information about the beneficiaries

	Beneficiary 1	Beneficiary 2	Beneficiary 3
Family name			
Given name			
Sex	☐ Male ☐ Female	☐ Male ☐ Female	☐ Male ☐ Female
Social Insurance Number			
Date of birth (yyyy/mm/dd)			

☐ **Insert a checkmark if there are additional beneficiaries (complete Annex 1)** Total number of beneficiaries

Send to relinquishing promoter with a copy of Part A and Annex 1 (as applicable)

Ce formulaire est disponible en français

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4 Transfer eligibility information

1. Does the receiving RESP comply with the conditions for registration, as required under the *Income Tax Act*?	☐ YES ☐ NO
2. Do you, the receiving promoter and your trustee, have a signed agreement with ESDC to offer education savings incentives administered by ESDC? If yes, indicate which incentives you offer:	☐ YES ☐ NO
a) the basic amount of Canada Education Savings Grant (Basic CESG)	☐ YES ☐ NO
b) the additional amount of Canada Education Savings Grant (Additional CESG)	☐ YES ☐ NO
i) If you **do not** offer the Additional CESG and it exists in the relinquishing RESP, do you, the receiving promoter, agree to administer the rules of the Additional CESG? **(See section 8: A to B Transfer policy in Transfer form Part A)**	☐ YES ☐ NO
c) the Canada Learning Bond (CLB)	☐ YES ☐ NO
d) the British Columbia Training and Education Savings Grant (BCTESG)	☐ YES ☐ NO
e) the Saskatchewan Advantage Grant for Education Savings (SAGES)	☐ YES ☐ NO
3. Is the receiving RESP either an individual plan or a family plan in which all beneficiaries are brothers and sisters (no cousins)?	☐ YES ☐ NO

5 Privacy

The information provided in this form will be shared with the relinquishing promoter for the purposes of processing this transfer.

Personal information will be handled in accordance with the privacy legislation in the respective jurisdictions. The transfer is also subject to *The Personal Information Protection and Electronic Documents Act* (PIPEDA). PIPEDA provides every person with a right of access to information under the control of the receiving promoter and/or the relinquishing promoter, subject to a limited set of exemptions.

6 Certification

I certify that to the best of my knowledge, the information given on this form and the attached **Annex 1 - Additional beneficiaries** (if applicable) is accurate and complete.

Name of authorized RESP promoter representative	Telephone number	Fax number
Signature of authorized RESP promoter representative		**Date (yyyy/mm/dd)**

Where to get more information:
Phone: 1 888 276-3624 / 1 800 465-7735 for TTY users only
E-mail: cesp-pcee@hrsdc-rhdcc.gc.ca
Internet: www.canada.ca/RESPresources

Send to relinquishing promoter with a copy of Part A and Annex 1 (as applicable)

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