



Human Resources
Professionals
Association

2020 Renewal Dues Assistance Program

To ensure we will be able to process your RDAP application in time for the renewal deadline, please submit your application no later than July 24th. While we will do our best to process RDAP applications received post July 24th prior to July 31st to allow registrants to complete their renewal before the deadline, unfortunately we cannot guarantee it. The late fee will apply to all renewals that are still outstanding as of August 1st.

This accommodation policy is for current registrants who require assistance with their annual renewal dues.

Please note: Registrants who are registered as students will only be eligible for the Renewal Dues Assistance Program in exceptional circumstances since students dues are the lowest dues available.

Registrants may submit the **Renewal Dues Assistance Program Request form** and supporting document(s) by faxing, mailing or emailing it to the contact details noted at the bottom of the page. Once your application is received it takes an average of 10 business days for processing. Please note that HRPA is unable to process any applications without the required proof of status

An email confirmation will be sent once your application has been reviewed. If your accommodation request is approved, your renewal invoice will be adjusted accordingly, and you will be instructed to complete your renewal online.

Please be advised that if you are approved for Renewal dues Assistance Program and you submit after the deadline, your late fee will also be reduced to \$50 and the student is \$20. Also, payment for HRPA registrations are non-refundable.

If registrants do not wish to renew their registration, they may resign at any time by delivering his or her written resignation by completing the [Resignation form](#). Such resignation takes effect at the time the resignation is received by the Registrar or at the time specified in the resignation, whichever is later. Resignation terminates the Registrant's registration with HRPA. Before submitting your resignation, kindly review our [Reinstatement and Re-achievement Policy](#). Please note the HRPA cannot accept resignations over the phone.

All mandatory information is collected pursuant to the [Registered Human Resources Professionals Act, 2013](#), and the [HRPA By-laws](#). To review HRPA's [privacy policy](#), please visit www.hrpa.ca, or contact privacy@hrpa.ca.

Reason for assistance request	Required supporting documentation	Percentage of dues to be paid
Parental Leave		
1st year of leave	One of: <ul style="list-style-type: none"> • ROE • Letter from employer • EI Statement 	30%
2nd year of leave (returning after 18 months)	One of: <ul style="list-style-type: none"> • ROE • Letter from employer • EI Statement 	50%

Reason for assistance request	Required supporting documentation	Percentage of dues to be paid
Unemployment		
Initial loss of job	One of: <ul style="list-style-type: none"> • ROE • EI Statement • Standard Undertaking (page 8) 	30%
Stay at home parent	One of: <ul style="list-style-type: none"> • ROE • EI Statement • Standard Undertaking (page 8) 	30%
More than 1 year of being unemployed	NOA + Standard Undertaking (page 8)	30%
Contract Work		
0 – 6 month contract	Letter from employer stating duration of contract and salary	50%
6 – 12 month contract	Letter from employer stating duration of contract and salary	80%
Illness and Disability		
Working part-time or reduced hours due to medical condition	Doctor's note <ul style="list-style-type: none"> • No prognosis required • Written within 30 days • Hours of work per week <p>If you cannot provide a doctor's note, please complete a Standard Undertaking</p>	50%
Not working on a full-time basis due to medical condition	Doctor's note <ul style="list-style-type: none"> • No prognosis required • Written within 30 days <p>If you cannot provide a doctor's note, please complete a Standard Undertaking</p>	0%
Immediate family support		
Supporting multiple individuals/families	Standard Undertaking (page 8)	80%
<u>Sole</u> income earner for family (income will be based on the LICO table from the Government of Canada)	NOA + Standard Undertaking	70%
Educational Leave		
Not working on a full-time basis	One of: <ul style="list-style-type: none"> • Letter from employer stating leave from work • ROE Plus a letter from educational institution confirming student status	50%
Taking classes while working	Letter from educational institution confirming student status	80%

Reason for assistance request	Required supporting documentation	Percentage of dues to be paid
Retired		
Not working in any capacity. May volunteer in a non-HR capacity.	Standard Undertaking (page 8)	20%
Working part-time or reduced hours in non-HR capacity with a maximum of 15 hours per week. May volunteer in a non-HR capacity.	Letter from employer confirming hours of work	30%
Low Income		
Individual income will be based on the LICO table from the Government of Canada	One of: <ul style="list-style-type: none"> • NOA • Letter from employer confirming salary 	70%
Employed with reduced hours		
Registrants who are experiencing reduced hours.	Letter from employer confirming reduced hours	70%

Terms

ROE – Record of Employment

EI – Employment Insurance

NOA – Notice of Assessment

LICO - Low Income Cut-Off (table from Government of Canada)

Table 1 - Low Income Cut-Off (LICO)

Size of Family Unit	Maximum income
1 person (HRPA Registrant)	\$24,949
2 persons	\$31,061
3 persons	\$38,185
4 persons	\$46,362
5 persons	\$52,583
6 persons	\$59,304
7 persons	\$66,027
More than 7 persons, for each additional person, add	\$6,723

*Source: <https://www.canada.ca/en/immigration-refugees-citizenship/services/application/application-forms-guides/guide-5482-instruction-fill-financial-evaluation-form-1283.html>

The following are select examples (of the above scenarios) based on the 2019-2020 renewal rates:

Examples

2019-2020 Dues	Renewal	
	In Province	Out of Province
CHRE	\$480	\$395
CHRL	\$480	\$395
CHRP	\$341	\$256
Practitioner	\$406	\$321
Allied Professional	\$256	\$171

1. A CHRP is on a 0 – 6 month contract. Their new renewal rate would be $\$341 * 50\% = \$170.50 + \text{HST}$.
2. A CHRL has just lost their job. Their new renewal rate would be $\$480 * 30\% = \$144 + \text{HST}$.
3. A Practitioner has just started their parental leave. Their new renewal rate would be $\$406 * 30\% = \$121.80 + \text{HST}$.
4. A Practitioner is taking classes, but still employed. Their new renewal rate would be $\$406 * 80\% + \$324.80 + \text{HST}$.
5. A CHRE has limited to low income. Their new renewal rate would be $\$480 * 70\% = \$336 + \text{HST}$.
6. A CHRL has completely retired. Their new renewal rate would be $\$480 * 20\% = \$96 + \text{HST}$.



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A. Personal Information

HRPA ID #:	
Legal First name on file:	Legal Last name on file:

B. Reason for accommodation request and Supporting document

Kindly choose only **one (1)** reason that best suits your situation and submit the appropriate supporting document.

Reason for assistance request	Required supporting documentation	Percentage of dues to be paid
Parental Leave		
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Immediate family support		
Supporting multiple individuals/families	Standard Undertaking (page 8)	80%
<u>Sole</u> income earner for family (income will be based on the LICO table from the Government of Canada)	NOA + Standard Undertaking (page 8)	70%

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Low Income		
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Employed with reduced hours		
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C. Terms and Conditions

I confirm that the statements made by me in this form are correct and complete to the best of my knowledge and belief. I acknowledge that HRPAA may carry out whatever investigations may be reasonably required to verify the accuracy of the statements above. I understand that a false or misleading statement or representation may lead to a refusal to issue a certificate of registration or to revocation of my certificate of registration with the Association.

By checking this box, I agree to and confirm the above Terms and Conditions

Signature: _____ Date signed(mm/dd/yyyy)_____



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ACKNOWLEDGEMENT AND ATTESTATION (STANDARD UNDERTAKING)

Please complete this Acknowledgement for accommodations that require a standard undertaking only.

I, _____ (enter applicant's full name), hereby acknowledge and confirm the following:

1. I attest that,

(Please check only one (1) that best suits your situation)

my employment recently ended.

I have been unemployed for more than 1 year.

I am a stay-at-home parent.

my annual income is \$_____ and I support _____ individuals.

my annual income is \$_____ and I am the sole income earner for my family.

I am retired and not working in any capacity. Also, I don't volunteer in a HR capacity.

I am retired and working in a non-HR capacity on a part-time or reduced hours (less than 15 hours a week). Also, I don't volunteer in a HR capacity.

I am working part-time or reduced hours due to medical condition.

I am not working on a full-time basis due to medical condition.

2. I acknowledge that if HRPAA ever becomes aware that I made misrepresentations with respect to the applicable statement above, the Association will be entitled to rely upon this Acknowledgement and Attestation in any disciplinary or similar proceeding.

Signed this _____ day of _____, 2020

(Applicant's full name)

Witness to the signature of
(Name of witness)

Witness Print Name

By providing an electronic signature, I confirm my understanding and agreement to the terms of this form.