ORAT
Office for Refugees
Archdiocese *of* Toronto

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e: oratrefugeeoffice@archtoronto.org
w: www.archtoronto.org/refugee

COSPONSOR
Cheque Requisition from the Central Refugee Account

Funds are disbursed on a quarterly basis, with the initial installment including start-up plus 3 months of RAP support (Resettlement Assistance Program). Each of the remaining 3 installments include 3 months of RAP support only. Please fill and send in your request 30 days in advance of when the funds are required. Kindly use the DD-MMM-YY format (e.g., 26-Apr-17). Please email the form to oratoutreach@archtoronto.org.

G Number	Family Size	Constituent Group Name	Date (DD-MMM-YY)

Cosponsor

Full Name	Telephone Number	Email Address

Principal Applicant (Newcomer)

Full Name	Telephone Number	Email Address

Official Liability for Arrived: [1]		Official Liability: [1]	
Amount Deposited:		Arrival Date (DD-MMM-YY):	
Official Start-up Costs: [1]		Sponsorship-End Date:	
Official 3 Months RAP: [1]		Is the Newcomer(s) Employed? [2]	☐ Yes ☐ No
Present Balance:		Is the Newcomer(s) financially self-sufficient?	☐ Yes ☐ No
Amount Requested		Number of Non-Accompanying Family Members (NAF):	No. of NAF :
Remaining Balance:	0.00	Satisfaction Level: [3]	
Total Money Disbursed:	0.00		

Cheque: Payable to: _____ Mailing Address: _____

Signatures: Date _____

_____ _____ _____
Cosponsor ORAT Outreach ORAT Director

_____
Archdiocese Accounting Date: _____

For Office Use:

Comments: _____ Fund pool: _____ Gap Addressed: _____

☐ - For Pick-Up ☐ - For Mailing Other Instructions: _____

[1] Please use the Budget Workbook, which is located on the ORAT website to calculate this figure. Archdiocese of Toronto - Resources (archtoronto.org)

[2] This is for information purposes only. It will not affect the disbursement of funds.

[3] The newcomer is to provide a measure of satisfaction with their integration using the following scale: excellent, very good, good, poor, very poor