HELPFUL NOTES TO STUDENTS FOR FILLING OUT THE APPLICATION

- Your completed application, with all required information, must be received a minimum of eight weeks before the start date of your program in order to receive notice of your funding for the start of classes.
- If your application is received without all necessary supporting documentation applicable to your situation, it will not be processed and a letter will be sent requesting the missing information. This may delay receipt of your funding. Be sure to read the following notes.
- Do NOT send in original supporting documentation. Due to the volume of documentation received annually, Student Financial Services (SFS) is unable to return original supporting documentation to you; therefore send copies.

NOTE # 1 – EMAIL ADDRESS

The National Student Loans Service Centre (NSLSC) is moving toward improved electronic service delivery by April 2019. This year you are required to provide an email address and, in order to receive student loan/grant funding, new applicants requiring a Master Student Financial Assistance Agreement (MSFAA) will be required to follow a two-step online process to: (1) confirm their identity and register their account with the NSLSC and (2) complete their MSFAA online and accept the Terms and Conditions of the agreement.

After you apply for funding and receive your Notice of Assessment you will receive a “Welcome Email” from the NSLSC with details on the next steps you will need to take to receive your funding.

NOTE # 2 – PERMANENT DISABILITY

Students with a permanent disability are considered full-time students when studying in at least 40% of a course load. A Request for Program Information form is required to be completed by the post-secondary educational institution you plan to attend to verify the amount of tuition, student fees and book costs associated with the course load which you plan to complete. This form is available at studentaid.gnb.ca. You can ask your educational institution to forward the completed form directly to SFS.

If you have a permanent disability, and you have not previously been approved for funding as a student with permanent disabilities by this office, you must attach a completed Medical Assessment Form to your application. This form is available at studentaid.gnb.ca.

NOTE # 3 – REGISTERED INDIANS

Registered Indians are individuals who are registered with the federal government as Indians, according to the terms of the Indian Act. The Indian Register is the official record identifying all Registered Indians in Canada and does not require or reflect Canadian citizenship.

NOTE # 4 – PERMANENT RESIDENT

You are able to apply for assistance immediately upon receiving your permanent resident status. However, in order to be considered for the provincial portion of assistance, you must be considered a resident of New Brunswick (see “SECTION 3 – RESIDENCY” of the application). If you are not considered a resident of New Brunswick, and are not considered a resident of another Province/Territory in Canada, complete the application; you will be considered for the federal portion of assistance.

• Provide a clear copy of both sides of your Permanent Resident (PR) card which must be valid for the entire study period for which you are applying for financial assistance; or a copy of your landing document.
• Permanent Resident students, who have been sponsored into Canada, are required to provide a letter from their sponsor giving the details of the sponsorship.

Students who are in Canada on a Student Visa are not eligible to receive Canada/New Brunswick Student Loans.

NOTE # 5 – PROTECTED PERSONS OF CANADA
You are able to apply for assistance immediately upon receiving your Protected Person Status Document (PPSD) and your Social Insurance Number (SIN) that begins with a “9”. However, in order to be considered for the provincial portion of assistance, you must be considered a resident of New Brunswick (see “SECTION 3 – RESIDENCY” of the application). If you are not considered a resident of New Brunswick, and are not considered a resident of another Province/Territory in Canada, complete the application; you will be considered for the federal portion of assistance.

• If you are a Protected Person of Canada (including Convention Refugees), provide a clear copy of both sides of your Protected Person Status Document (PPSD), which must be valid for the entire study period for which you are applying for financial assistance; or a copy of the Notice of Decision issued by the Immigration and Refugee Board; or a copy of the Verification of Status document from Citizenship and Immigration Canada; and

• A clear copy of your SIN document that begins with a “9” must be submitted with your application. If you do not have a SIN document, you must get one before you can apply for student financial assistance. Like your PPSD, your SIN document must be valid for the entire study period for which you are applying for financial assistance.

NOTE # 6 – USE OF CURRENT YEAR ESTIMATED INCOME
On your application, you must include Line 150 of the 2017 Income Tax Return. However, if your current year’s 2018 income is significantly lower than your previous year Line 150 of your Income Tax Return, you can request a review. Information on the review process and the necessary documentation is detailed on the Student Financial Services website at studentaid.gnb.ca under Requesting a Funding Review.

NOTE # 7 – DEPENDANTS
Dependants are:
  – any children who are 18 years or younger and are wholly dependent on the parent(s) for support and for whom the parent or the parent’s partner, in law or in fact, have the custody and control; or
  – any children who are in a full-time program at a secondary school or a post-secondary educational institution and who fit in the Dependent Student Category (see “SECTION 2 – STUDENT CATEGORY” of the application); or
  – anyone claimed on the 2017 Income Tax Return as wholly dependent other than your partner. Provide a copy of the most recent tax form substantiating Canada Revenue Agency approval of the wholly dependent person.

If you are a dependent student and your sibling is also attending a post-secondary educational institution but is not applying for student financial assistance, the expected parental contribution will be divided by the number of dependants enrolled in full-time studies if you submit proof of your sibling’s enrolment at a designated post-secondary educational institution.

If there are two or more dependent students in the family applying for student financial assistance, the applications should be submitted at the same time.

If you are a single parent student or a married/common-law student with a dependant 12 years of age or older who is disabled, proof of the disability in the form of a medical certificate or documentation proving receipt of federal or provincial disability assistance is required. This proof must be sent with your application in order for you to be considered for the Canada Student Grant for Students with Dependants.

NOTE # 8 – PARTNER’S CONTRIBUTION
Partners who are full-time students, partners in receipt of Employment Insurance (EI) benefits or social assistance, and partners in receipt of federal or provincial/territorial permanent disability benefits, are exempt from providing the partner contribution.

If you are a married/common-law student, you can choose whether or not to include your partner’s income in your application for financial assistance.
If you **do provide** your partner’s income, you will be assessed for all federally and provincially-funded programs listed in the Information Guide (as applicable). A partner contribution, if any, will not be used for the purpose of determining your need for New Brunswick Student Loan.

If you choose **not to include** your partner’s income, you will be assessed for New Brunswick Student Loan only (up to $140 per week of study).

**NOTE # 9 – PERSONS IN PERMANENT CARE**

You are considered an Independent Student if you are receiving, or have received, support from the Department of Social Development under one of the permanent care support programs detailed below.

- **Child in Permanent Care**: refers to a child under the permanent legal care, control and supervision of the Department of Social Development either by Court order or voluntary agreement between the Department and a child’s parents or guardians.
- **Post Guardianship agreement**: refers to any child who has been under a guardianship order or agreement, after they reach the age of 19 and up until the age of 24, provided that the young person is enrolled in an educational program.
- **Voluntary Care Support agreement**: the Department of Social Development may enter into a Voluntary Care Support agreement with a former youth in care. This agreement may be entered with a youth who upon reaching their 19th birthday had a guardianship status left the care of the Minister and prior to their 21st birthday is accepted by a post-educational institution into a program of full-time studies.

This also includes those who were adopted or returned to their birth families after the expiration of a guardianship order/agreement.

**NOTE # 10 – PARENTAL CONTRIBUTION**

If you are a dependent student, you can choose whether or not to include your parent’s income in your application for financial assistance.

If you **do provide** your parent’s income, you will be assessed for all federally and provincially-funded programs listed in the Information Guide (as applicable). A parental contribution will not be used for the purpose of determining your need for New Brunswick Student Loan.

If you choose **not to include** your parent’s income, you will be assessed for New Brunswick Student Loan only (up to $140 per week of study).

**NOTE # 11 – INDIGENOUS PERSONS OF CANADA**

An Indigenous Person is a North American Indian or a member of a First Nation, a Métis or Inuit. North American Indians or members of a First Nation include status, treaty or registered Indians, as well as non-status and non-registered Indians.

Students who self-identify as Indigenous learners are exempt from making a fixed student contribution. (For more information see “How Your Assistance is Calculated” in the Information Guide at [studentaid.gnb.ca](http://studentaid.gnb.ca).) As well, the Post-Secondary Student Support Program (PSSSP) funding provided by Indigenous and Northern Affairs Canada is exempt from consideration in the need assessment process.

**NOTE # 12 – REQUEST FOR PROGRAM INFORMATION FORM**

A *Request for Program Information* form is required to be completed by the post-secondary educational institution you plan to attend if any of the following situations apply to your study period. This form is available at [studentaid.gnb.ca](http://studentaid.gnb.ca).

If you are applying:
- for a period of study that includes a co-op work term;
- attending Intersession and/or Summer Session at a university;
- for studies at the Master or Ph.D. level;
- to attend any private post-secondary educational institution located outside New Brunswick;
- to attend any educational institution located in Quebec;
- to attend a public post-secondary educational institution outside of Canada;
- as a student with a permanent disability (see also **NOTE # 2**).
Students attending a private post-secondary educational institution located in New Brunswick will need to contact their institution to determine if a Request for Program Information form is required.

The completed form should be submitted to SFS to avoid delays in processing your application. You can ask your educational institution to forward the completed form directly to SFS.

NOTE # 13 – STUDY PERIOD TARGETED RESOURCES

On your application include only funding you are receiving specifically targeted to cover education costs. Targeted funds could be paid directly to your educational institution (for instance, to cover tuition), or they could be paid directly to you. For example, a training allowance or a stipend from an employer that covers room and board is considered a targeted resource.

Exception: The Post-Secondary Student Support Program (PSSSP) funding provided by Indigenous and Northern Affairs Canada is exempted.

NOTE # 14 – TRAINING AND SKILLS DEVELOPMENT

The Training and Skills Development (TSD) program ensures that case managed individuals, whose employment action plan identifies skill development as being necessary, have access to funding to assist them in achieving their goal.

The program provides financial assistance to individuals who enroll and participate in education and skills training programs. The program is determined to be the shortest training path in order to obtain the skills necessary to either successfully transition into today's labour market or obtain/maintain long-term sustainable full-time employment. See Quick Links, Training and Skills Development, at studentaid.gnb.ca.
NEW BRUNSWICK STUDENT FINANCIAL ASSISTANCE
APPLICATION FOR FULL-TIME STUDY
2018-2019
For classes beginning between August 1, 2018 and July 31, 2019

• This application must be completed by the STUDENT in INK. Print clearly.
• For the purpose of completing this application, the term “parent” refers to parent(s), step-parent(s) or guardian(s); the term “partner” refers to spouse or common-law partner; the term “educational institution” refers to the post-secondary educational institution in which you are enrolled or plan to enrol.

SECTION 1 – PERSONAL INFORMATION

<table>
<thead>
<tr>
<th>Social Insurance Number</th>
<th>Date of Birth</th>
<th>YYYY MM DD</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Legal First Name</th>
<th>Legal Last Name</th>
<th>Middle Initial</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>Language</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>English</td>
</tr>
<tr>
<td>Female</td>
<td>French</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Your Marital Status (as of the first day of classes)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single ___  Married ___  Common-law ___  Separated ___  Divorced ___  Widowed ___</td>
</tr>
</tbody>
</table>

Your Mailing Address

<table>
<thead>
<tr>
<th>Civic (Street) Address or P.O. Box</th>
<th>Apt. No.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City/Town</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Province/Territory</th>
<th>Country</th>
<th>Postal Code</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Telephone No.</th>
</tr>
</thead>
</table>

Email Address (Mandatory; see NOTE #1)

Do you have a permanent disability (see NOTE #2)?

| Yes | No |

Are you a Canadian citizen?

| Yes | No |

You are not a Canadian citizen but are a Registered Indian (see NOTE #3)?

| Yes | No |

If No, are you a Permanent Resident (see NOTE #4)?

| Yes | No |

<table>
<thead>
<tr>
<th>Date you arrived in Canada</th>
<th>Date you arrived in New Brunswick</th>
</tr>
</thead>
<tbody>
<tr>
<td>YYYY MM DD</td>
<td>YYYY MM DD</td>
</tr>
</tbody>
</table>

Are you a Protected Person of Canada (see NOTE #5)?

| Yes | No |

<table>
<thead>
<tr>
<th>Date you arrived in Canada</th>
<th>Date you arrived in New Brunswick</th>
</tr>
</thead>
<tbody>
<tr>
<td>YYYY MM DD</td>
<td>YYYY MM DD</td>
</tr>
</tbody>
</table>

Have you previously cashed a student loan from New Brunswick?

| Yes | No |

Latest year cashed ________

Have you previously cashed a government student loan from a province or territory other than New Brunswick?

| Yes | No |

Latest year cashed ________

INCOME TAX INFORMATION

<table>
<thead>
<tr>
<th>Did you file a 2017 Income Tax Return?</th>
<th>Were you employed in 2017?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

The amount showing on line 150 of your 2017 Income Tax Return is required.

Enter “0” if there is no amount reported/to be reported (see NOTE #6).

If you have not yet filed your tax return, provide the information that you will be reporting on these line numbers.

<table>
<thead>
<tr>
<th>Total Income 150</th>
<th>Elected Split Pension Amount 210</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

Page 1 of 15
SECTION 2 – STUDENT CATEGORY

To correctly complete this application, you must first determine your student category. Read the statements in the list below. Place a check mark (✓) beside the first statement appearing in the list that best describes what your situation will be on the first day of the study period for which you are applying.

NOTE: Selecting the wrong student category will cause a significant delay in the processing of your application. You should have only one statement marked ✓, and it must be beside the first statement that is true to your situation.

Your student category is:

- **Married or Common-law**
  If you and your partner are:
  
  - Legally married; or
  - Receiving social assistance as a family unit from the Department of Social Development and currently living common-law; or
  - In a common-law relationship and claimed your marital status as common-law on your 2017 Income Tax Return; or
  - The parents of one or more children, and have physical custody and responsibility for the dependent children who live with you (see NOTE #7).

  If you checked one of the statements above, you are considered a Married or Common-law student.

  Indicate below if you wish to apply for all funding programs available or if you wish to apply for New Brunswick Student Loan only (see NOTE #8).

  - I am applying for full consideration under the Canada and New Brunswick Student Loan Programs. **You must complete Sections 1 to 6, Section 7D, Section 9 and Section 10.**
  - I am applying for New Brunswick Student Loan only. **You must complete Sections 1 to 6, Section 8B and Section 9.**

If you did not check a statement above, go to the next student category.

- **Single Parent**
  If you:
  
  - Have physical custody and responsibility of one or more dependent children who live with you at least 50% of the time (see NOTE #7); and are not married or common-law.

  If you checked the statement above, you are considered a Single Parent student. **You must complete Sections 1 to 6, Section 7C and Section 9.**

If you did not check a statement above, go to the next student category.

- **Independent Student**
  If you do not have physical custody and responsibility of dependent children (see NOTE #7), **and** you:
  
  - Have been out of high school for at least two years and have completed two periods of 12 consecutive months in the labour force (working, actively seeking employment or receiving Employment Insurance benefits) while not studying full-time at a post-secondary educational institution; or
  
  - Have graduated or have been out of high school for four years or more – as an example, you graduated from high school in 2014 or earlier and your study period begins in September 2018; or
  
  - Are currently or have been a person in permanent care with the Department of Social Development (see NOTE #9), or
  
  - Are receiving, or have received, financial assistance under Youth Engagement Services (YES) from the Department of Social Development, or have no parent, guardian, sponsor or other supporting relative due to death or disappearance; or
  
  - Are no longer married or in a common-law relationship.

  If you checked one of the statements above, you are considered an Independent Student. **You must complete Sections 1 to 6, Section 7B and Section 9.**

If you did not check a statement above, go to the next student category.

- **Dependent Student**
  None of the above statements apply to you.

  Indicate below if you wish to apply for all funding programs available or if you wish to apply for New Brunswick Student Loan only (see NOTE #10).

  - I am applying for full consideration under the Canada and New Brunswick Student Loan Programs. **You must complete Sections 1 to 6, Section 7A, Section 9 and Section 10.**
  - I am applying for New Brunswick Student Loan only. **You must complete Sections 1 to 6, Section 8A and Section 9.**
**SELF-DECLARATION** (see NOTE # 11).

*The following information is voluntary.*

**Indigenous Ancestry**

Indigenous people are those who identify themselves to be North American Indian, Treaty/Registered/Status Indian, Non-Status Indian, Métis or Inuit. Based on this definition, **do you consider yourself to be of Indigenous ancestry?**

If yes, please indicate below which group you belong to.

- [ ] Métis  
- [ ] Non-Status Indian  
- [ ] Inuit  
- [ ] Treaty/Registered/Status Indian

**Visible Minority Status**

Visible minority persons are persons other than Indigenous people, who are people of colour. For example, African, Chinese, Korean or Pacific Islander ancestry. Based on this definition, **do you consider yourself to be a visible minority person?**

- [ ] Yes  
- [ ] No
SECTION 3 – RESIDENCY

You must apply for student financial assistance to the province/territory in which you are considered a resident. (Permanent Resident – see NOTE # 4; Protected Person of Canada – see NOTE # 5.) Find your student category in the left-hand column and answer all questions applicable to that student category.

Your student category is:

- **Dependent**
  
  (i) Indicate the last place your parent lived for 12 consecutive months prior to the first day of your study period for the 2018-2019 academic year.

<table>
<thead>
<tr>
<th>Province / Territory (or Country, if outside Canada)</th>
<th>YYYY MM</th>
<th>to</th>
<th>YYYY MM</th>
</tr>
</thead>
</table>

  (ii) If your parent lives/lived outside Canada – i.e. with the Armed Forces – indicate where your parent last resided or maintained the family home for 12 consecutive months before leaving Canada. If outside New Brunswick, indicate dates from YYYY MM to YYYY MM.

<table>
<thead>
<tr>
<th>Province / Territory (or Country, if outside Canada)</th>
<th>YYYY MM</th>
<th>to</th>
<th>YYYY MM</th>
</tr>
</thead>
</table>

  (iii) If you did not indicate New Brunswick in section (i) or section (ii), did you remain in New Brunswick to begin or continue post-secondary education within 12 months of the date your parent left New Brunswick?

  Yes _____ No _____

  If you indicated New Brunswick in section (i) or section (ii), or answered yes to section (iii), you are considered a New Brunswick resident. Go to Section 4. If you did not indicate New Brunswick in section (i) or section (ii), or answered no to section (iii), you are not considered a resident of New Brunswick. You must apply to the province/territory you have indicated.

- **Single Parent or Independent**

  Indicate the last province or territory in Canada you lived for 12 consecutive months prior to the first day of your study period for the 2018-2019 academic year (while not studying full time at a post-secondary educational institution).

<table>
<thead>
<tr>
<th>Province / Territory</th>
<th>YYYY MM</th>
<th>to</th>
<th>YYYY MM</th>
</tr>
</thead>
</table>

  If you indicated New Brunswick you are considered a resident of New Brunswick. Go to section 4. If you did not indicate New Brunswick, you must apply to the province/territory you have indicated.

- **Married or Common-law**

  A. If either of the following statements applies to your situation, you are not considered a resident of New Brunswick and must apply to the province/territory where your partner is considered to be a resident.

  - You are studying outside New Brunswick, your partner is living in the same province/territory where you are studying, and your partner is and has been employed in that province/territory for at least 12 consecutive months before the start of your study period, or
  - Your partner is also studying full time at a post-secondary educational institution and is considered a resident of another province/territory and you are attending a post-secondary educational institution in the province/territory in which your partner is considered a resident.

  B. If neither of the statements above applies to your situation, complete the following:

  As of the first day of your study period for the 2018-2019 academic year, the last place you and your partner lived for 12 consecutive months, while not studying full time at a post-secondary educational institution, was:

  (i) **Applicant**

<table>
<thead>
<tr>
<th>Province / Territory (or Country, if outside Canada)</th>
<th>YYYY MM</th>
<th>to</th>
<th>YYYY MM</th>
</tr>
</thead>
</table>

  (ii) **Partner**

<table>
<thead>
<tr>
<th>Province / Territory (or Country, if outside Canada)</th>
<th>YYYY MM</th>
<th>to</th>
<th>YYYY MM</th>
</tr>
</thead>
</table>

  (iii) You are studying in New Brunswick and New Brunswick was not the province in which you last lived for 12 consecutive months while not studying full time at a post-secondary educational institution; however, your partner is living in New Brunswick, is and has been employed in New Brunswick for at least 12 consecutive months prior to the first day of the study period for which you are applying.

  Yes _____ No _____

  If you indicated New Brunswick in section (i) or (ii), or answered yes to section (iii), you are considered a resident of New Brunswick. Go to Section 4. If you did not indicate New Brunswick, you must apply to the province/territory you have indicated.
SECTION 4 – PROGRAM OF STUDY
FOR THE 2018-2019 ACADEMIC YEAR

A Request for Program Information form may be required (see NOTE # 12).

Educational Institution you plan to attend

Name of Educational Institution/Campus

City or Town of Campus you are attending

Mailing Address of Educational Institution indicated above

Street/P.O. Box No.

City or Town

Province/Territory

Postal Code

Exact name of your Program of Study

(i.e. Bachelor of Arts Degree, Business Technology Diploma)

(i.e. History, Accounting)

Are you in a Co-op program? Yes _____ No _____

You are entering year ___ of a ___ year program.

Expected graduation date: ___________ | ___________ YYYY MM

You are enrolled in the following level of study: Certificate ____ Diploma ____ Bachelor ____ Master ____ Ph.D. ____

Indicate start and end dates for your academic year

Study Term (in classes)

Co-op Work Term

Practicum

Indicate whether you will live with your parent/partner while:

Yes _____ No _____

Completing your co-op work term

Yes _____ No _____

Completing your practicum

If no, indicate where you will live.

City or Town

Province/Territory

Is your program of study through distance education or correspondence? Yes _____ No _____

What percentage of a full-time course load will you be taking? ______ %

COURSE LOAD

Your course load refers to the number of courses or credits you are taking. Your educational institution determines the number of courses or credits that make up 100% course load.

As a general rule, 5 courses = 100% course load
4 courses = 80% course load
3 courses = 60% course load
2 courses = 40% course load
1 course = 20% course load

Contact your educational institution if you need help determining your course load percentage.
SECTION 5 – EDUCATIONAL HISTORY

Name of High School ____________________________
Teacher: ____________________________
City or Town ____________________________ Province/Territory ____________________________
Graduated from High School or Left High School
Highest Grade completed (up to Grade 12) ____________________________

<table>
<thead>
<tr>
<th>Year</th>
<th>MM</th>
<th>Year</th>
<th>MM</th>
</tr>
</thead>
<tbody>
<tr>
<td>YYYY</td>
<td></td>
<td>YYYY</td>
<td></td>
</tr>
</tbody>
</table>

Have you received Grade 12 equivalency (GED)? Yes ____ No ____
If yes, indicate date ____________________________

Have you ever enrolled full-time at a Post-Secondary Educational Institution? Yes ____ No ____

If yes, and you are a first-time New Brunswick student loan applicant, provide the following detailed information for each year you have attended a Post-Secondary Educational Institution as a full-time student.

Note: If you have completed this form on a previous application, you need only provide details of any post-secondary education since your last application.

Complete this section starting with the latest year attended.

<table>
<thead>
<tr>
<th>Faculty</th>
<th>Year</th>
<th>Level of Study</th>
<th>and Major</th>
<th>Did you graduate?</th>
<th>Did you receive a Canada/New Brunswick Student Loan during this study period?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes ____ No ____</td>
</tr>
</tbody>
</table>
| Name of Institution ____________________________
Name of Program ____________________________
Start Date YYYY MM ____________________________
End Date YYYY MM ____________________________

<table>
<thead>
<tr>
<th>Faculty</th>
<th>Year</th>
<th>Level of Study</th>
<th>and Major</th>
<th>Did you graduate?</th>
<th>Did you receive a Canada/New Brunswick Student Loan during this study period?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes ____ No ____</td>
</tr>
</tbody>
</table>
| Name of Institution ____________________________
Name of Program ____________________________
Start Date YYYY MM ____________________________
End Date YYYY MM ____________________________

<table>
<thead>
<tr>
<th>Faculty</th>
<th>Year</th>
<th>Level of Study</th>
<th>and Major</th>
<th>Did you graduate?</th>
<th>Did you receive a Canada/New Brunswick Student Loan during this study period?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes ____ No ____</td>
</tr>
</tbody>
</table>
| Name of Institution ____________________________
Name of Program ____________________________
Start Date YYYY MM ____________________________
End Date YYYY MM ____________________________

* Indicate the number of your level of study for this study period: 1 = Certificate  2 = Diploma  3 = Bachelor  4 = Master  5 = PhD
SECTION 6 – STUDY PERIOD RESOURCES

Your study period is the period while you are in class.

Do you or will you have any of the following financial resources during your study period?  

Yes _____  No _____

You do NOT need to include the following resources: savings, RRSPs, RESPs, employment income, Social Assistance benefits, Employment Insurance (NB-EI Connect Program) benefits, CPP/QPP benefits, Canada child benefit or PSSSP funding provided by Indigenous and Northern Affairs Canada.

If yes, provide detailed information as indicated below.

Indicate all income, before deductions, that you expect to receive during your study period from the following sources:

- Scholarships/Bursaries – do not include any expected from New Brunswick Student Financial Assistance.  
  $ _________  Source/Name ____________________________
  $ _________  Source/Name ____________________________
  $ _________  Source/Name ____________________________

- Tuition reduction/Family discount – if you are eligible for a reduced tuition fee, you must claim the amount of the reduction. (For example, if your parent is employed by the institution you are attending, you may be charged a reduced tuition fee.)  
  $ _________

- Indicate total amount and source of any other targeted resource you will have during this study period (see NOTE # 13).  
  $ _________  Source/Name ____________________________

- Have you met or are you planning to meet with an Employment Counsellor concerning Training and Skills Development (TSD) funding for your program of study (see NOTE # 14)?  
  Yes _____  No _____

- Name of your TSD Employment Counsellor, if known.  
  ____________________________

Refer to the Student Category you determined in Section 2 and go to the next applicable section.
SECTION 7A – DEPENDENT STUDENTS

1. List all dependants in your family unit (see NOTE # 7). Do not list yourself or your parents.

<table>
<thead>
<tr>
<th>Dependants not enrolled in post-secondary studies</th>
<th>First Name</th>
<th>Relationship to you</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dependants enrolled in post-secondary studies</th>
<th>First Name</th>
<th>Relationship to you</th>
<th>Age</th>
<th>Social Insurance Number</th>
<th>Name of Post-Secondary Educational Institution</th>
<th>Dates of Study From (YYYY/MM)</th>
<th>To (YYYY/MM)</th>
<th>Also applying for student financial assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes ___ No ___</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes ___ No ___</td>
</tr>
</tbody>
</table>

2. While in classes, will you live with your parent? Yes ___ No ___

3. How far is your parent's home from the institution you plan to attend (# of kilometres one way)?

4. Financial Information: You are required to provide the amounts showing on the following line numbers of your parent's 2017 Income Tax Return(s). If they have not yet filed their tax return(s), provide the information that they will be reporting on these line numbers.

If your parents are separated or divorced, the parent with whom you normally reside or who supports the majority of your living expenses is considered to be your custodial parent for the purpose of completing this application. Your custodial parent must complete this section. If your custodial parent remarried or was in a common-law relationship before you turned 18 years of age, or if your step-parent has legally adopted you, your step-parent's income tax information is also required.

- Name of Parent/Guardian/Step-Parent
- Social Insurance Number of Parent/Guardian/Step-Parent
- Date of Birth
- Postal Code
- Did your parent file a 2017 Income Tax Return? Yes ___ No ___

Enter “0” if there is no amount reported/to be reported.

<table>
<thead>
<tr>
<th>Line 150</th>
<th>Total income (see NOTE # 6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Line 210</td>
<td>Elected Split Pension Amount</td>
</tr>
<tr>
<td>Line 230</td>
<td>Support payments made</td>
</tr>
<tr>
<td>Line 303</td>
<td>Spouse or common-law partner amount</td>
</tr>
<tr>
<td>Line 308 or 310</td>
<td>CPP or QPP contributions</td>
</tr>
<tr>
<td>Line 312</td>
<td>Employment Insurance premiums</td>
</tr>
<tr>
<td>Line 435</td>
<td>Total payable</td>
</tr>
</tbody>
</table>

Indicate any financial support you will receive from your non-custodial parent towards the cost of your study period. $__________

5. Authorization to communicate with parent(s)/guardian(s)/step-parent(s): If you wish your parent(s)/guardian(s)/step-parent(s) to communicate with SFS on your behalf regarding your student financial assistance file, you must complete this section. Completion of this section will authorize SFS to communicate with your parent(s)/guardian(s)/step-parent(s) identified below regarding your file, and to disclose to and discuss with the parent(s)/guardian(s)/step-parent(s) identified below your personal information contained in your file, namely: your personal, academic and financial information contained in your application form, in the material provided in connection with your application; the status of your application; and, the administration, repayment and collection of any financial assistance provided to you as a result of your application for assistance. If you wish to authorize SFS to communicate with your parent(s)/guardian(s)/step-parent(s) in these regards, please complete the following.

<table>
<thead>
<tr>
<th>Name of Parent/Guardian/Step-parent</th>
<th>Relationship to You</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ENSURE YOU HAVE COMPLETED SECTIONS 1 TO 7A, 9 AND 10.
ALL DEPENDENT STUDENTS AND THEIR PARENT(S)/STEP-PARENT(S)/GUARDIAN(S) MUST READ, SIGN AND RETURN THE DECLARATIONS AND CONSENTS LOCATED ON PAGES 13, 14 AND 15 OF THIS APPLICATION.
SECTION 7B – INDEPENDENT STUDENTS

1. While in classes, will you live with your parent? Yes ____ No ____

2. How far is your parent’s home from the school you plan to attend (# of kilometres one way)? __________

3. Provide the dates when you were employed, received Employment Insurance (EI) benefits, or were actively seeking employment since leaving high school (up to a maximum of the last four years). For periods of employment, list name of employer. Do not list any periods when you were in full-time post-secondary studies.

If you have completed this information on a previous application, you need only provide details of any employment history since your last application.

<table>
<thead>
<tr>
<th>From (YYYY/MM)</th>
<th>To (YYYY/MM)</th>
<th>If you were employed, list your employer’s name.</th>
<th>If you were not employed, indicate whether you were receiving EI benefits or seeking employment.</th>
<th>Province</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ENSURE YOU HAVE COMPLETED SECTIONS 1 TO 6, 7B AND 9.
ALL INDEPENDENT STUDENTS MUST READ, SIGN AND RETURN THE DECLARATIONS AND CONSENTS LOCATED ON PAGES 13 AND 14 OF THIS APPLICATION.

SECTION 7C – SINGLE PARENT STUDENTS

1. List all dependants in your family unit (see NOTE # 7). Do not list yourself.

Dependants under 12 years of age on your first day of classes

<table>
<thead>
<tr>
<th>First Name</th>
<th>Relationship to you</th>
<th>Date of Birth (YYYY/MM/DD)</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Dependants 12 years or older, not enrolled in post-secondary studies

<table>
<thead>
<tr>
<th>First Name</th>
<th>Relationship to you</th>
<th>Date of Birth (YYYY/MM/DD)</th>
<th>Disabled</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes ____ No ___</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes ____ No ___</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes ____ No ___</td>
</tr>
</tbody>
</table>

Dependants enrolled in post-secondary studies

<table>
<thead>
<tr>
<th>First Name</th>
<th>Relationship to you</th>
<th>Date of Birth (YYYY/MM/DD)</th>
<th>Disabled</th>
<th>Social Insurance Number</th>
<th>Dates of Study From (YYYY/MM) To (YYYY/MM)</th>
<th>Also applying for student financial assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes ____ No ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes ____ No ___</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes ____ No ___</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. While in classes, will you live with your parent? Yes ____ No ____

ENSURE YOU HAVE COMPLETED SECTIONS 1 TO 6, 7C AND 9.
ALL SINGLE PARENT STUDENTS MUST READ, SIGN AND RETURN THE DECLARATIONS AND CONSENTS LOCATED ON PAGES 13 AND 14 OF THIS APPLICATION.
1. Partner’s First Name ___________________________ Last Name ___________________________  
Social Insurance Number _______________ Date of Birth YYYY MM DD  
Is your partner in receipt of   (i) Employment Insurance (EI) benefits? Yes ___ No ___  
   (ii) Social Assistance? Yes ___ No ___  
   (iii) Federal or Provincial disability benefits? Yes ___ No ___  

2. Financial Information: You are required to provide the amounts showing on the following line numbers of your partner’s 2017 Income Tax Return. If he/she has not yet filed his/her tax return, provide the information that he/she will be reporting on this line number.  
Did your partner file a 2017 Income Tax Return? Yes ___ No ___  
The amount showing on line 150 of your partner’s 2017 Income Tax Return is required. Enter “0” if there is no amount reported/to be reported (see NOTE # 6).  

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>150 $</td>
</tr>
</tbody>
</table>

Elected Split Pension Amount 210 $  

3. While in classes, will you live with your partner? Yes ___ No ___  
If no, which of you will reside away from your family home? You ____ Your partner ____  

4. Where is the secondary residence located? ___________________________  
City or Town ___________________________ Province/Territory ___________________________  
How many weeks will you or your partner live away from your family home? Number of weeks ____  

5. Your partner is currently:  
   ___ Employed  
   ___ Unemployed  
   ___ Attending post-secondary studies on a full-time basis  
If you checked “Attending post-secondary studies on a full-time basis”, the following information is required regarding your partner.  

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th>Yes ___ No ___</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Post-Secondary Educational Institution</td>
<td>Program of Study</td>
<td>Dates of Study From (YYYY/MM)</td>
<td>To (YYYY/MM)</td>
<td>Also applying for student financial assistance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes ___ No ___</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: If your partner is a full-time student and also applying for New Brunswick Student Financial Assistance, send both applications together.  

6. List all dependants in your family unit (see NOTE # 7). Do not list yourself or your partner.  
Dependants under 12 years of age on your first day of classes  

<table>
<thead>
<tr>
<th>First Name</th>
<th>Relationship to you</th>
<th>Date of Birth (YYYY/MM/DD)</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Dependants 12 years or older, not enrolled in post-secondary studies  

<table>
<thead>
<tr>
<th>First Name</th>
<th>Relationship to you</th>
<th>Date of Birth (YYYY/MM/DD)</th>
<th>Disabled</th>
<th>Yes ___ No ___</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes ___ No ___</td>
</tr>
</tbody>
</table>

Dependants enrolled in post-secondary studies  

<table>
<thead>
<tr>
<th>First Name</th>
<th>Relationship to you</th>
<th>Date of Birth (YYYY/MM/DD)</th>
<th>Disabled</th>
<th>Social Insurance Number</th>
<th>Dates of Study From (YYYY/MM)</th>
<th>To (YYYY/MM)</th>
<th>Also applying for student financial assistance</th>
<th>Yes ___ No ___</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ENSURE YOU HAVE COMPLETED SECTIONS 1 TO 6, 7D, 9 AND 10.  
ALL MARRIED/COMMON-LAW STUDENTS AND THEIR PARTNER MUST READ, SIGN AND RETURN THE DECLARATIONS AND CONSENTS LOCATED ON PAGES 13, 14 AND 15 OF THIS APPLICATION.
SECTION 8A – DEPENDENT STUDENTS APPLYING FOR NEW BRUNSWICK STUDENT LOAN ONLY

1. While in classes, will you live with your parent? Yes _____ No _____

2. How far is your parent’s home from the school you plan to attend (# of kilometres one way)? _______

3. **Authorization to communicate with parent(s)/guardian(s)/step-parent(s):** If you wish your parent(s)/guardian(s)/step-parent(s) to communicate with SFS on your behalf regarding your student financial assistance file, you must complete this section. Completion of this section will authorize SFS to communicate with your parent(s)/guardian(s)/step-parent(s) identified below regarding your file, and to disclose to and discuss with the parent(s)/guardian(s)/step-parent(s) identified below your personal information contained in your file, namely: your personal, academic and financial information contained in your application form, in the material provided in connection with your application, and in the material SFS is authorized by you and by law to collect in connection with your application; the status of your application; and, the administration, repayment and collection of any financial assistance provided to you as a result of your application for assistance. If you wish to authorize SFS to communicate with your parent(s)/guardian(s)/step-parent(s) in these regards, please complete the following.

   **Name of Parent/Guardian/Step-parent** ___________________________  **Relationship to You** ___________________________

   **Name of Parent/Guardian/Step-parent** ___________________________  **Relationship to You** ___________________________

ENSURE YOU HAVE COMPLETED SECTIONS 1 TO 6, 8A AND 9.
ALL STUDENTS MUST READ, SIGN AND RETURN THE DECLARATIONS AND CONSENTS LOCATED ON PAGES 13 AND 14 OF THIS APPLICATION.
SECTION 8B – MARRIED/COMMON-LAW STUDENTS APPLYING FOR NEW BRUNSWICK STUDENT LOAN ONLY

1. While in classes, will you live with your partner? Yes _____ No _____
   If no, which of you will reside away from your family home? You _____ Your partner _____

2. Where is the secondary residence located? _______________ City or Town _______________ Province/Territory
   How many weeks will you or your partner live away from your family home? Number of weeks _____

3. Your partner is currently:
   __ Employed
   __ Unemployed
   __ Attending post-secondary studies on a full-time basis
   If you checked “Attending post-secondary studies on a full-time basis”, the following information is required regarding your partner.

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Date of Birth (YYYY/MM/DD)</th>
<th>Name of Post-Secondary Educational Institution</th>
<th>Program of Study</th>
<th>Dates of Study From (YYYY/MM)</th>
<th>To (YYYY/MM)</th>
<th>Also applying for student financial assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes ___ No ___</td>
</tr>
</tbody>
</table>

4. List all dependants in your family unit (see NOTE #7). Do not list yourself or your partner.

**Dependants under 12 years of age on your first day of classes**

<table>
<thead>
<tr>
<th>First Name</th>
<th>Relationship to you</th>
<th>Date of Birth (YYYY/MM/DD)</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Dependants 12 years or older, not enrolled in post-secondary studies**

<table>
<thead>
<tr>
<th>First Name</th>
<th>Relationship to you</th>
<th>Date of Birth (YYYY/MM/DD)</th>
<th>Disabled</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes ___</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>No ___</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes ___</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>No ___</td>
</tr>
</tbody>
</table>

**Dependants enrolled in post-secondary studies**

<table>
<thead>
<tr>
<th>First Name</th>
<th>Relationship to you</th>
<th>Date of Birth (YYYY/MM/DD)</th>
<th>Disabled</th>
<th>Social Insurance Number</th>
<th>Dates of Study From (YYYY/MM) To (YYYY/MM)</th>
<th>Also applying for student financial assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes ___</td>
<td>No ___</td>
<td></td>
<td>Yes ___ No ___</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes ___</td>
<td>No ___</td>
<td></td>
<td>Yes ___ No ___</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes ___</td>
<td>No ___</td>
<td></td>
<td>Yes ___ No ___</td>
</tr>
</tbody>
</table>

ENSURE YOU HAVE COMPLETED SECTIONS 1 TO 6, 8B AND 9.
ALL STUDENTS MUST READ, SIGN AND RETURN THE DECLARATIONS AND CONSENTS LOCATED ON PAGES 13 AND 14 OF THIS APPLICATION.
SECTION 9 – APPLICANT DECLARATIONS AND CONSENTS

If this section is not completed and returned to Student Financial Services (SFS), your application will not be processed.

MUST BE SIGNED BY ALL APPLICANTS

DECLARATIONS

I am hereby applying for financial assistance from SFS, knowing that it is an offence under the Canada Student Financial Assistance Act, the Canada Student Loans Act and the Post-Secondary Student Financial Assistance Act to knowingly make any false statements or misrepresentation in an application or other document, or to willfully furnish any false or misleading information. I understand that all file information is subject to audit and verification.

I understand that failure to provide complete, accurate or updated information and documentation, or supporting documentation, either in my application or in response to requests for verification or audit purposes, may preclude me from receiving financial assistance in the future, and may result in the cancellation of my current award and/or other benefits, such as bursaries and interest-free status.

I certify that I have read and understood the information provided in the Student Financial Assistance for Full-time Post-Secondary Students in New Brunswick Information Guide.

I CONSENT TO

- SFS collecting personal information about me, including, but not limited to, my updated address/telephone number and my academic performance for the period stated on this application, or for previous periods as considered necessary by SFS, from any department of the Province, the government of any other province or territory of Canada, the Government of Canada, service provider(s), educational institution(s), financial institution(s), and other agencies and persons, in relation to my application for student financial assistance;
- SFS using any personal information about me collected in relation to my application for student financial assistance;
- SFS exchanging any personal information about me collected in relation to my application for student financial assistance, with any department of the Province, the government of any other province or territory of Canada, the Government of Canada, service provider(s), educational institution(s), financial institution(s), and any other agencies and persons;
- SFS disclosing my social insurance number to the Canada Revenue Agency; and
- SFS verifying my personal information (specifically, my social insurance number, name, date of birth, gender) provided in support of my application for student financial assistance, with information contained in the Employment and Social Development Canada Social Insurance Register;

for the following purposes:
- processing my application for student financial assistance;
- determining and verifying my eligibility for student financial assistance;
- administering any student financial assistance provided to me, including the repayment and collection thereof;
- carrying out their powers and duties in accordance with the Post-Secondary Student Financial Assistance Act and regulations thereunder;
- the administration and enforcement of the Post-Secondary Student Financial Assistance Act and regulations thereunder;
- recovering money owing under a direct loan, a loan made by a lender under the Youth Assistance Act (risk-shared loan) or a loan referred to in section 45 of the Post-Secondary Student Financial Assistance Act (fee for service loans); and
- confirming the accuracy of my identification in the context of my application for federal and provincial student financial assistance.

Signature of Applicant
Social Insurance Number
Date

THIS IS A THREE-PAGE DECLARATION. SEE PAGES 14 AND 15.
In the event that my student loan is transferred to the Corporate Collection Services of Service New Brunswick from the National Student Loans Service Centre, I give consent to the Canada Revenue Agency to provide my most current address and telephone number to the Corporate Collection Services unit. I understand that this information will be used to contact me to establish repayment arrangements of the provincial portion of my student loan. This last mentioned consent will apply until the provincial portion of my student loan is repaid in full.

Signature of Applicant

Social Insurance Number

Date  20 _____
SECTION 10 – PARENT(S)/GUARDIAN(S)/STEP-PARENT(S) OF DEPENDENT STUDENT APPLICANTS OR PARTNER OF MARRIED/COMMON-LAW STUDENT APPLICANTS DECLARATIONS AND CONSENT

MUST BE SIGNED BY THE PARENT(S)/GUARDIAN(S)/STEP-PARENT(S) OF DEPENDENT STUDENT APPLICANTS OR PARTNER OF MARRIED/COMMON-LAW STUDENT APPLICANTS

DECLARATIONS

I declare that I have given complete and true information, knowing that it is an offence under the Canada Student Financial Assistance Act, the Canada Student Loans Act and the Post-Secondary Student Financial Assistance Act to knowingly make any false statements or misrepresentation in an application or other document, or to willfully furnish any false or misleading information.

I understand that I am not liable for government student loans granted to the applicant.

I CONSENT TO

- SFS collecting personal information about me from any department of the Province, the government of any other province or territory of Canada, the Government of Canada, service provider(s), educational institution(s), financial institution(s), and other agencies and persons;
- SFS using such personal information so collected; and
- SFS exchanging such personal information so collected with any department of the Province, the government of any other province or territory of Canada, the Government of Canada, service provider(s), educational institution(s), financial institution(s), and any other agencies and persons;

for the following purposes:
- processing the applicant’s application for student financial assistance;
- determining and verifying the applicant’s eligibility for student financial assistance;
- administering any student financial assistance provided to the applicant, including the repayment and collection thereof;
- carrying out their powers and duties in accordance with the Post-Secondary Student Financial Assistance Act and regulations thereunder; and,
- the administration and enforcement of the Post-Secondary Student Financial Assistance Act and regulations thereunder.

Further, in the event the applicant requests a review of their application for student financial assistance, I consent to SFS disclosing to the applicant any of my personal information provided by me or by a third party to SFS in relation to the applicant’s application for student financial assistance.

<table>
<thead>
<tr>
<th>Signature of Parent/Guardian/Step-parent or Partner</th>
<th>Social Insurance Number</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>20 ____</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signature of Parent/Guardian/Step-parent</th>
<th>Social Insurance Number</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>20 ____</td>
</tr>
</tbody>
</table>

Note: The signatures of both parents are required, if applicable.