

# REQUEST FOR PROGRAM INFORMATION



This form is to be completed **by the post-secondary institution** and is **mandatory** for the following circumstances:

- Any student:
- applying as a student with a disability.
  - completing a co-op work term as part of the study period.
  - studying at the Master or Ph.D. level.
  - attending any public or private post-secondary institution located outside of New Brunswick.

The student's application for New Brunswick Student Financial Assistance is not able to be processed without this form. See pages 3 and 4 for detailed instructions on completing this form.

**Note:** For students who choose to attend Intersession or Summer Session at a university, please complete the *Request for Program Information Form - Intersession/Summer Session*.

## SECTION A—STUDENT INFORMATION

Last Name (current legal name)	First Name (current legal name)
XXX      XXX	
Social Insurance Number (last 3 digits only)	Student ID Number (at your Institution)

## SECTION B—INSTITUTION INFORMATION

Name of Institution	Institution Code (4-Letters)
City/Town	Province/State
	Postal/Zip Code

## SECTION C—PROGRAM INFORMATION

Program Name	<b>Level of Study</b> <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate	<b>Year of Study*</b> _____ of _____ <small>Program Year      Total Years</small> <small>*see instructions on page 3</small>
<b>Co-op Program</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Credential</b> <input type="checkbox"/> Certificate <input type="checkbox"/> Diploma <input type="checkbox"/> Bachelor's <input type="checkbox"/> Associate <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate	
<b>Area of Study</b> <input type="checkbox"/> Administration/Business <input type="checkbox"/> Agriculture/Related Sciences <input type="checkbox"/> Arts/Sciences <input type="checkbox"/> Community Service/Education <input type="checkbox"/> Dentistry <input type="checkbox"/> Engineering/Technology <input type="checkbox"/> Health Sciences <input type="checkbox"/> Law <input type="checkbox"/> Medicine <input type="checkbox"/> Theology <input type="checkbox"/> Trades <input type="checkbox"/> Other (specify) _____		

## SECTION D—PROGRAM COST INFORMATION

**Currency**     CAD     USD     Other    Specify: \_\_\_\_\_

Semester/Term	% of Full Course Load <sup>♦</sup>	Actual Tuition Costs*	Compulsory Fees*	Co-op Fees
1 <sup>st</sup> Semester/Term (Fall)				
2 <sup>nd</sup> Semester/Term (Winter)				
3 <sup>rd</sup> Semester/Term (Spring/Summer)				
Non-Semestering				

<sup>♦</sup>% of Full Course Load must only reflect courses that contribute to credential completion.

### Student Financial Services

#### Post-Secondary Education, Training and Labour

Beaverbrook Building P.O. Box 6000 Fredericton NB E3B 5H1  
 Tel.: 506-453-2577 Toll Free: 1-800-667-5626 Fax: 506-444-4333



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\*Do not include residence fees, optional fees, Health and Dental fees, book or equipment costs or computer purchase.

Student Name \_\_\_\_\_ SIN (last 3 digits) XXX XXX

Other financial assistance student is receiving this study period \_\_\_\_\_ Source \_\_\_\_\_  
 (ie scholarship, bursary, grant, honorarium, fellowship, sponsorship, etc.) Amount \_\_\_\_\_

**SECTION E—STUDY PERIOD INFORMATION**

Method of Delivery (specific to student above)

In Person     Online/Correspondence     Blended (In Person and Online)

Period of Study Dates— **THIS PERIOD MUST BE AT LEAST 6 WEEKS AND CANNOT EXCEED 52 WEEKS**

Start date (yyyy/mm/dd) \_\_\_\_\_ End date (yyyy/mm/dd) \_\_\_\_\_

Indicate the exact dates of each of the following activities that occur for the study period.

	1 <sup>st</sup> Semester/Term		2 <sup>nd</sup> Semester/Term		3 <sup>rd</sup> Semester/Term		Non-Semestering	
	Start Date (yy/mm/dd)	End Date (yy/mm/dd)	Start Date (yy/mm/dd)	End Date (yy/mm/dd)	Start Date (yy/mm/dd)	End Date (yy/mm/dd)	Start Date (yy/mm/dd)	End Date (yy/mm/dd)
Full-time studies								
Part-time studies								
Writing (Thesis / Dissertation)								
Paid Practicum / Co-op								
Unpaid Practicum / Co-op								
Break weeks								

<b>Definitions</b>	Full-time or part-time studies	status determined by the educational institution on the basis of its criteria
	Writing	thesis or dissertation
	Practicum / co-op	practical section of the program
	Break weeks	a full-week break in study where there are no classes or other educational activities (i.e., exams)
	Not enrolled	is not attending the educational institution during this period of time

**SECTION F—INSTITUTION OFFICIAL**

**Declaration**

*I declare that the information provided on this form is complete and true and that I am authorized to provide this information on behalf of the institution identified in Section B.*

\_\_\_\_\_  
 Name of authorized representative  
 (you may be contacted by our office if we require additional information)

\_\_\_\_\_  
 Title

\_\_\_\_\_  
 Email address

\_\_\_\_\_  
 Phone number

\_\_\_\_\_  
 Signature of authorized representative

\_\_\_\_\_  
 Date

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## INSTRUCTIONS TO INSTITUTIONS

This form is used to gather information for the specific student for whom the form is being completed for the study period that starts anytime between August 1, 2024, and July 31, 2025 (inclusive). The student does not have to be currently registered or attending your school to complete this form.

Complete this form only if you are authorized to confirm the student's program details and costs. Once you have completed and signed the form, return the form to the student to submit or send it via fax to 506-444-4333 or email to [NB-SFS.SFE-NB@gnb.ca](mailto:NB-SFS.SFE-NB@gnb.ca). If you have questions about the completion of this form, please refer to Section 1.6 of the New Brunswick Designated Post-Secondary Education Institution Administration Manual for the contact information related to Program Information/Internal Compliance.

### SECTION A—STUDENT INFORMATION

- Provide the full **legal** name, last 3 digits of the Social Insurance Number and the student ID from your institution. *The student's name provided on this form should be the same as the name with which they applied for student financial assistance.*

### SECTION B—INSTITUTION INFORMATION

- Indicate the institution information including the campus if applicable.

### SECTION C—PROGRAM INFORMATION

- Complete this section with the details of the program of study for the student including the level of study, the credential that will be awarded upon completion and the area of study. If this is a program that has not previously been evaluated/funded, a program designation review may be required.
- For *Year of Study*, include the current year of study in the program for the student and the total number of years of the program (see example below). Note that the Program Year number may not be the same as the number of years the student has been attending your school, for example if the student has switched programs or is taking a reduced course load.

#### EXAMPLE

*Student is in their second year of a four-year degree program.*

<b>Year of Study</b>			
<u>2</u>	of	<u>4</u>	
Program Year		Total Years	

### SECTION D—PROGRAM COST INFORMATION

- Indicate the program costs.
- Indicate the percentage of full course load the student is taking each semester (i.e., if five courses are considered 100%, four courses would be considered 80%). This must only include courses that are required for credential completion. Mandatory electives can be included but extra courses or courses for upgrading are not considered part of the course load for the purposes of student financial assistance.
- Indicate the actual cost of tuition based on the actual amount payable to the institution.
- Indicate the compulsory fees that are payable by the student.
  - o Compulsory fees can include:
    - annual admission fees required when submitting applications
    - student council fees
    - student services fees
    - field trip costs
    - examination fees
    - graduate thesis costs
    - other amounts payable by student to the institution which are obligatory for their program
    - membership fees for professional or other societies

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- Compulsory fees do not include:
  - residence fees
  - health and dental fees
  - book or equipment costs
  - computer costs
  - optional fees
- Indicate the fees related to completion of a co-op placement separately from compulsory fees.
- Indicate the source and amount for any other financial assistance student is receiving this study period, including entrance scholarships, merit-based scholarships, need based scholarships or bursaries, grants, honorariums, doctoral fellowships or sponsorships.

#### SECTION E—STUDY PERIOD INFORMATION

- Indicate the method of delivery for the study period.
- Indicate the exact study period start and end dates. The study period must be at least 6 weeks and cannot exceed 52 weeks. If it is more than 52 weeks, the study period will need to be divided into multiple study periods with separate applications by the student.
- Complete the study period date table—see example.

#### EXAMPLE

*Student is in full-time studies for both the fall and winter terms. Fall term begins on September 3, 2024, and the last day of studies (including exams) is December 20, 2024. Winter term starts on January 6, 2025, with Spring break being March 3–7, 2025. Winter term concludes (including exams) April 25, 2025. The program includes an unpaid co-op placement that begins on April 28, 2025, and concludes on June 6, 2025.*

	1 <sup>st</sup> Semester/Term		2 <sup>nd</sup> Semester/Term		3 <sup>rd</sup> Semester/Term		Non-Semestering	
	Start Date (yy/mm/dd)	End Date (yy/mm/dd)	Start Date (yy/mm/dd)	End Date (yy/mm/dd)	Start Date (yy/mm/dd)	End Date (yy/mm/dd)	Start Date (yy/mm/dd)	End Date (yy/mm/dd)
Full-time studies	24/09/03	24/12/20	25/01/06	25/04/25				
Part-time studies								
Writing (Thesis / Dissertation)								
Paid Practicum / Co-op								
Unpaid Practicum / Co-op					25/04/28	25/06/06		
Break weeks	24/12/23	25/01/03	25/03/03	25/03/07				

#### SECTION F—INSTITUTION OFFICIAL

- This section is to be completed by the authorized representative of the institution who has completed the program information details.
- Be sure to provide contact information including phone number and email so that we may contact you if there are any questions or clarifications required.
- Signing the form is acknowledgment of the stated declaration.

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