

SECTION 1 - PERSONAL INFORMATION (cont'd)

Gender: Female Male Date of Birth: |_____| |_____| |_____|
Year Month Day

Place of Birth: |_____| |_____| |_____|
City Territory/Province/State Country

Canadian Resident From: |_____| |_____| (do not leave blank) If born in Canada put year and month of birth
Year Month

Yukon Resident From: |_____| |_____| (do not leave blank) If you have ever left the Yukon for more than 12 consecutive
Year Month months enter your most recent return date

At the time of this application I am: Single Single Parent Married Common Law
(living together 1 year or more)

At the time of this application I am: Canadian Citizen
 Permanent Resident (Copy of Confirmation of Permanent Residence must be attached)
 Protected Person (Copy of Protected Person Status Document must be attached)

Optional for Statistical Purposes Only: The information is used to improve Advanced Education Programs and Services.

Aboriginal people are persons in Canada who consider themselves to be Status, Non-Status, Inuit, Metis and/or a Beneficiary.

Do you consider yourself to be an aboriginal person? Yes No

If YES, please mark the applicable box: Status Non-Status

Are you a citizen of a Self Governing First Nation? Yes No

If YES, please indicate your First Nation: |_____|

Do you consider yourself as having a disability? Yes No

Do you consider yourself a member of a visible minority group? Yes No

Next of Kin: (e.g. father, sister, etc. do not use your spouse or your children as next of kin):

|_____| |_____|
Last Name Given Name

|_____| |_____|
Address Extra line for address

|_____| |_____|
City Prov/Terr/State

|_____| |_____|
Country Postal Code/Zip Code

SECTION 2 - RESIDENCY INFORMATION

Give a complete breakdown of where you were actually living for the 2 years immediately prior to the start of your classes for this academic year. **Show separately the periods you were in school and not in school.**

From		To		City	Territory/Province/State	Country	I was in School		
Year	Month	Year	Month				Ftime	Ptime	No
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 3 - STUDENT'S DEPENDENTS (if applicable)

Please list your dependent(s)

Last Name, First Name	Age			Relationship to You	Lives With You		Shared Custody		Attending Post-Secondary	
	Year	Month	Day		Yes	No	Yes	No	Yes	No
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you share custody of your dependent(s) when do they live with you? _____

DAYCARE EXPENSES:

If you have day care expenses during your class hours for children 11 years and younger, what is your weekly day care costs for the study period? \$ _____ (weekly)

SECTION 4 - PROGRAM INFORMATION FOR THIS YEAR

The information you will be providing below is for an entire academic school year. You have to apply yearly if you are continuing your studies and want to reapply for part-time assistance.

Name of Institution: _____

Campus, if applicable: _____

City Prov/Terr/State

Student Identification Number: _____

Program of Study: _____
(i.e. Science, Geography, Engineering, Upgrading, etc.)

How many years is your program? (i.e. 1, 2, 3, 4 or 5 year duration)

Which year of program are you currently entering? (i.e. 1st year of a 1, 2, 3 or 4 year program)

Are you taking this program by correspondence? Yes No

I am enrolled in the following courses:	Course Description	Course Code	Type of Instruction
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

SECTION 5 - PREVIOUS AND REQUIRED ASSISTANCE

I request a Part-time loan to take part-time post-secondary studies in the amount of \$_____ (maximum \$4000)

I am applying for a Part-time Canada Student Loan for the sole purpose of qualifying for the Canada Study Grant for High Need part-time study and I am not interested in applying for the part-time loan portion.

• Have you ever received a Canada Student Loan for full-time studies? Yes No

• Have you ever received a Canada Student Loan for part-time studies? Yes No

If yes, what is the outstanding principal owing on your part-time loan? \$_____

• Have you received a Canada Student Grant for Part-time Study? Yes No

If yes, were you successful in passing all course(s)? Yes No

SECTION 6 - TO BE COMPLETED BY THE EDUCATIONAL INSTITUTION

This section is to be completed by your educational institution. This is to verify that all information provided in Section 4 is complete and correct.

Name of Student: | _____ | | _____ |
Last Name First Name

Name of Institution: | _____ |

For this school year: The start date of this applicant's classes is: From: | ____ | ____ | ____ |
Year Month Day

The finish date of this applicant's classes is: From: | ____ | ____ | ____ |
(include exam dates) Year Month Day

What type of program is this applicant taking? Certificate (normally 1 year duration)
 Diploma (normally 2 year duration)
 Under-graduate degree (normally 4 year duration)
 Masters/Graduate
 Doctoral

What are the applicant's tuition and compulsory fees for the period of studies? \$ _____ |

What are the applicant's book and equipment costs for the period of studies? \$ _____ |

What is the applicant's percentage of a full course load? | _____ | (cannot be less than 20% or more than 59%)

Is the part-time study that this applicant is taking part of a full-time program? Yes No

Number of weeks of study | _____ |

How many hours of class time will the applicant have each week (do not include any lab times) | _____ |

I certify that the information that I have just completed in Section 6 of this application is correct and represents the program in which the student has been accepted or enrolled.

Date | ____ | ____ | ____ |
Year Month Day

Signature: | _____ |

(_____)
Telephone

Print Name: | _____ |

Title: | _____ |

SECTION 7 - STUDENT'S INCOME & ASSET INFORMATION

If your status is married or common-law, your spouse's income information must also be provided at Section 8.

Applicant's Income

List all actual/expected gross income (income before deductions) for the 12 month period, ending with the last month of your current/proposed period of part-time studies. (For example, estimating your expected income if your course of study ends in August, is by quoting all income from September of the previous year to the end of August, which is the month in which your classes finish)

The information you indicate below should include all gross income (taxable and non-taxable) from employment, government benefits, child or alimony support, other educational funding, etc.

Status of your employment: Full-time Part-time Unemployed

How many hours per week are you working? |_____|

FROM		TO		Name of Employer, EI, Social Asst, etc.	Gross \$ Amount
Year	Month	Year	Month		
____	____	____	____	_____	\$ _____
____	____	____	____	_____	\$ _____
____	____	____	____	_____	\$ _____
____	____	____	____	_____	\$ _____

Financial Assets

Bank Accounts: Do you and your spouse (if applicable) have chequing and/or savings accounts? Yes No

Total of all Student Accounts \$|_____| as of today's date |____| |____|
Year Month

Total of all Spouse Accounts \$|_____| as of today's date |____| |____|
Year Month

Total of all Joint Accounts \$|_____| as of today's date |____| |____|
Year Month

Investment Assets

Do you and your spouse (if applicable) have any investments? Yes No

If yes, list all of your and your spouse's (if applicable) investments as of today's date:

Types of investments to include are mutual funds, T-bills, Canada/Provincial savings bonds, etc.

Investment type	RRSP		Current Market Value	Ownership	
	Yes	No		Self	Spouse
_____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 8 - SPOUSE or COMMONLAW (CL) SPOUSE'S INCOME

Applicant (Student) Name: _____

If your status is married or common-law, your spouse's income information in this section must be completed and signed.

List all actual/expected gross income (income before deductions) for the 12 month period, ending with the last month of your spouse's current/proposed period of part-time studies. (For example, estimating your expected income if your course of study ends in August, is by quoting all income from September of the previous year to the end of August, which is the month in which your classes finish)

The information that you indicate below should include all gross income (taxable and non-taxable) from employment, government benefits, child and/or alimony support, other educational funding, etc.

SPOUSE NAME: _____ Social Insurance No.: _____

Status of your current employment: Full-time Part-time Unemployed

How many hours per week are you working? _____

FROM		TO		Name of employer, EI, Social Asst, etc	Gross \$ Amount
Year	Month	Year	Month		
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	\$ _____

Declaration:

- I declare that the information provided in this form, is correct to the best of my knowledge. I make this declaration knowing that it is an offence under the *Canada Student Loans Act* to knowingly make any false statement or misrepresentation in this application or other documents or to willfully furnish any false or misleading information.
- I hereby authorize Revenue Canada to disclose any information pertaining to my tax records.
- I declare that the designated authority for the Yukon Territory has my authorization to obtain, as required, any information relating to my income, and hereby expressly consent to the release of information in support of this application for my spouse. I certify that I am not currently in default of any Canada Student loans. I am not liable for loans given to the applicant.
- I agree that information pertaining to this application may be shared with other funding agencies.

Spouse Signature: _____ Date: _____
Year Month Day

Print Name: _____

SECTION 9 - ADDITIONAL CANADA STUDENT LOAN GRANT PROGRAMS - PART-TIME

This summary is to assist in helping you make sure that proper documentation is attached to this application, on its way or is not applicable to you. Your application will not be assessed until proper documentation is received.

On its way Attached Not Applicable

 If you have received a previous Part-time Canada Student Loan you must attach an Official Transcript of marks from the institution you last received part-time loan or grant assistance.

 Proof of current income must be supplied by the applicant, for example, letter from employer, photocopy of cheque stub, etc. This proof of income must be dated within the last 2 months. If you are currently not in receipt of any income, please provide a written statement explaining your current situation. (e.g. how are you paying for accommodation, food, etc).

SECTION 10 - ADDITIONAL CANADA STUDENT LOAN GRANT PROGRAMS - PART-TIME

GRANT FOR PART-TIME STUDIES:

Students studying between 20 and 59% of a full course load may be eligible for a grant up to \$1,250 per loan year. This grant will automatically be assessed when applying for a part-time Canada Student Loan. Use the Part-time Canada Student Loan and Grant application.

GRANT - DEPENDENTS: A Grant is available for students with dependent(s). At the start of your classes, dependents must be under the age of 12 years and/or permanently disabled. Full-time students whose family income falls below established income thresholds who have demonstrated need of at least \$1 may receive \$200 per month of study. Part-time students must have been assessed the maximum financial need and may receive the lesser of their assessed need, \$40 per week of study for one or two dependents, \$60 per week of study for three or more dependents to a maximum of \$1,920. This grant is automatically assessed when applying for a part-time Canada Student Loan.

GRANT - PERMANENT DISABILITIES - SERVICES & EQUIPMENT:

A grant for Services & Equipment is available to assist with exceptional education related costs that are associated with certain disabilities to a maximum of \$8,000 per year. This Grant is available to a student with permanent disabilities in part time studies (20-39% course load). If you are unable to repay your loan due to your disability the Federal Government may pay it back on your behalf. A **schedule A** is required with your part-time Canada Student Loan application.

SECTION 11 - APPLICANT'S DECLARATION AND SIGNATURE

IMPORTANT – READ CAREFULLY AND SIGN IN INK

- I hereby authorize Human Resources Development Canada to release information to the Student Financial Assistance Unit about my Employment Insurance Claim, employment related issues and/or training related income support that I may be receiving.
- I hereby authorize student financial assistance, agencies, government departments, institutions and employers, to release and gather information related to this application.
- I hereby authorize the Student Financial Assistance Office of the Government of Yukon to obtain information about my credit history, including a complete report, from a consumer-reporting agency or financial institution for the purpose of determining whether I am eligible for a Canada Student Loan.
- I certify that I am not currently in default of any Canada Student Loans.
- I understand that if this loan is approved I must **pay** it back within the prescribed time and **agree** to all conditions of the loan agreement.
- I consent to give permission to access/discuss my personal and financial information with regard to my Yukon Student Financial Assistance or Canada Student Loan application to a parent, legal guardian, spouse or a third party:

Yes Print Name of person(s) we can release information too: 1. _____
and/or
2. _____

No

If I choose to revoke this Consent to Release Information before the end of this academic year, I may do so at any time by submitting a written letter to Yukon Student Financial Assistance.

- I understand that it is my responsibility to provide accurate financial information on this application form. If the financial information I provide is inaccurate this may result in an over-award. This over-award will be recovered on future approved loans. I also understand that if this loan is approved. I must **pay** it back within the prescribed time and **agree** to all conditions of the loan agreement.

I make this declaration conscientiously believing that the information in this application is true and correct, and knowing that it is of the same force and effect as if made under oath. I understand that false or misleading information in relation to this application constitutes an offence pursuant to the provisions of the Criminal Code of Canada.

Signature of Student: _____

Date |_____|_____|_____|
Year Month Day

Print Name: _____