

UGH STUDENT APPLICATION

**WORK STUDY PROGRAM**

(Fall 2014 – Winter 2015)

**/\*\*\*\*\* Use the “Tab” key moving from field to field. \*\*\*\*/**

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| Last Name\*:       First Name\*:       Phone #\*:       |
| Address\*:       City\*:       Province\*:    Postal Code\*:       |
| Social Ins.#: \*       Student #\*:       E-mail\*:       |
| Citizenship\*: Canadian [ ]  OR Permanent Resident [ ]  |
| Ontario Residency **(Must Complete)** Have lived in **\*\* Ontario since**\*   /    /      **(**mm/dd/year) |

\* **Mandatory Field**

**\*\* Note: all students (including Canadians) MUST tell us how long they have lived in Ontario consecutively – if since birth, indicate date of birth**

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| Academic Program Name\*:        |
| Current Semester\*: 1 [ ]  2 [ ]  3 [ ]  4 [ ]  5 [ ]  6 [ ]  7 [ ]  8 [ ]  |
| Are you taking 100% of Course Load in the Fall? (i.e. 6 out of 6 courses) Yes: [ ]  |
| If not, what percentage? (i.e. 5/6 = 80%, 4/6 = 60%)    % |
| Are you receiving OSAP assistance September - May? \* Yes: [ ]  Total Entitlement $:       No: [ ]  |

**Budget details MUST be completed Based on period from (September 2014 - May 2015)** \*

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| **YOUR EXPENSES** |
| Tuition\*: |        |
| Books/supplies\*: |        |
| Rent:       per month x 8 = |  $0.00 |
| Food:       per month x 8 = |  $0.00 |
| Other expenses:       per month x 8 =(personal, medical, laundry, transportation, telephone, etc.) |  $0.00 |
| **TOTAL EXPENSES:** |  $0.00 |

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| **YOUR INCOME** |
| Savings (not total earnings) (May 14 to August 14) |       |
| **Income (September 2014 - May 2015)** |  |
| OSAP total |       |
| Part Time Job, outside College |       |
| Other, ie. Spouse’s Income, Gov. Benefits |       |
| **TOTAL INCOME:** | $0.00 |

**TOTAL EXPENSES minus TOTAL INCOME:** **$0.00**

ARE YOU RECEIVING ANY OTHER GOVERNMENT FUNDING? \* YES: [ ]  OR NO: [ ]

**DECLARATION BY STUDENT:**

I certify that to the best of my knowledge the information on this page is true and correct, that I require additional funds to complete my studies. **I HAVE NOT PREVIOUSLY DEFAULTED ON A STUDENT LOAN.**

My academic progress is satisfactory and I agree to notify the Financial Aid Manager in writing, of any change in my academic or financial status during my study period.

"In accordance with Section 39(2) of the Freedom of information and Protection of Privacy Act. This is to advise you that the personal information collected on this form will be used for the proper administration of the Ontario Work Study Plan, and that the Ministry of Colleges and Universities is hereby authorized to disclose such information for the purposes of determining grants and loans to any educational institution, the federal government and its collection agencies, other ministries of the Ontario government, other educational authorities both inside and outside the Province of Ontario and financial institutions with which you may have an OSAP loan. This information is collected under the legal authority of Ministry of Colleges and Universities Act. R.S.O., 1980,c, 272 and regulations". Questions about this collection should be directed to the Director, Student Support Branch, P.O. Box 4500. Thunder Bay, Ontario, P7B 6G9. Telephone - (807) 343-7260.

Date: 07/08/2014 Student Initials\*:       Approval Date:    /    /      Approved by: