

STUDENT APPLICATION WORK STUDY PROGRAM (Spring and Summer 2014)

(Please Print)

 Last Name: _____ First: _____ 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** ____ / ____ / ____ **month/day/year**
**** Note: All students (including Canadians) MUST tell us how long they have lived in Ontario consecutively – if since birth, indicate date of birth**

 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 May - August? Yes Total Entitlement _____ No

Budget details **MUST** be completed
 Based on period from (May 2014 - August 2014)

YOUR EXPENSES		YOUR INCOME	
Summer Tuition (if it applies)	\$ _____	Savings (not total earnings) (Sept. 13 to May 14)	\$ _____
Summer books/supplies (if applies)	\$ _____	Income (May 2014-August 2014)	\$ _____
Rent _____ per month x 4 =	\$ _____	OSAP total	\$ _____
Food _____ per month x 4 =	\$ _____	Part Time Job, outside College	\$ _____
Other expenses (personal, medical, laundry , transportation, telephone, etc.) _____ per month x 4 =	\$ _____	Other, ie. Spouse's Income, Gov. Benefits	\$ _____
TOTAL EXPENSES:	\$ _____	TOTAL INCOME	\$ _____
TOTAL EXPENSES minus TOTAL INCOME:			\$ _____

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.

I acknowledge and understand that I MUST be returning in September 2014 as a full-time Humber or Guelph/Humber student.
"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

 Student Signature

Approval Date: _____ / _____ / _____

Approved by _____