



2006-2007
 Academic Information
 for Educational Institutions
 Outside of the Atlantic Provinces

Student Financial Services
 Department of Education
 PO Box 2000, 16 Fitzroy Street
 Charlottetown, PE
 Canada C1A 7N8
 Tel: 902 368-4640
 Fax: 902 368-6144

Please have the educational institution that you are attending outside of the Atlantic Provinces complete and return this form by fax or mail to Student Financial Services.

This is to verify that:

Student's Name

Social Insurance Number

The above student has applied to attend on a full-time basis the following educational institution:

Name of Educational Institution

Name of Program

Number of Years in Length

Major or Specialty

Level of study:

- Certificate Diploma Bachelors Degree Masters Degree Ph. D

The student will be attending this program for:

- 1 Term/Semester 2 Terms/Semesters 3 Terms/Semesters 12 months Other

Program Start Date

Program End Date

Number of Weeks of Study

Financial aid has been or will be awarded to this student (include scholarships, bursaries, assistantships) by this educational institution in the amounts stated. If no aid has been awarded please write "Nil".

Type of Award _____ Value \$ _____

Type of Award _____ Value \$ _____

Educational costs for the student's academic period as stated above will be:

Tuition \$ _____ Compulsory Fees \$ _____

Books & Supplies \$ _____ Breakdown of Fees _____

Official Stamp
 of the
 Educational
 Institution

Signature of School Official

Name of School Official (print)

School Official's Title

Date

Telephone Number