



Department of Education

### 2006-2007 Job Search

Office Use Only
File No. _____

Student Financial Services  
 Department of Education  
 PO Box 2000  
 16 Fitzroy Street  
 Charlottetown, PE C1A 7N8  
 Tel. # (902) 368-4640  
 www.studentloan.pe.ca

Student's Name \_\_\_\_\_

Social Insurance No. 

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If you are unable to provide the minimum student contribution, you must demonstrate that you were actively seeking employment during your pre-study period. This may be done by providing five letters from potential employers or by completing this form. Potential employers' signatures must be on this form.

This is to confirm that the above mentioned student applied for full-time employment (30-40 hours/week) during his/her work term.

Date Applied	Name of Business	Telephone No.	Name & Title of Official (please print)	Signature of Official
1.				
2.				
3.				
4.				
5.				

#### Declaration

I declare that the information given on this form is correct to the best of my knowledge. I make this declaration knowing it is an offence under the Canada Student Financial Assistance Act to knowingly make false statements or misrepresentation in an application or other document or to willfully provide any false or misleading information.

Date	X            S I G N   H E R E Student's Signature (in ink)
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