

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



**2006 – 2007
 Appeal Form**

Office Use Only
File Number
SIN
Date Received

Refer to “Focus on Your Future” guide, *Section 13: If You Need to Appeal*, for information on appealing your assessment and to *Section 11: Important Deadlines*, for the deadline dates. Please remember to complete all necessary sections and provide all necessary documentation.

Last Name	Given Name	Middle Initial	Telephone Number
Address Where Living <u>While in School</u>	City	Province	Postal Code

Check appropriate box(es) and provide required documentation as indicated.

Possible reasons for appealing your student loan assessment are:

Documentation will not be photocopied or returned.

Appeal of Student Contribution and/or Academic Costs

Reasons	Supporting Documentation
<input type="checkbox"/> Expenses were too high during your pre-study period to enable you to save the expected student contribution.	Complete Section 1 of this form and provide verification of all expenses (i.e. receipts, bank statements, etc.).
<input type="checkbox"/> No work was available.	Provide verification of your search for full-time employment with letters from at least five potential employers or complete a Job Search statement available online at www.studentloan.pe.ca .
<input type="checkbox"/> Only part-time work or a reduced work period.	
<input type="checkbox"/> Attended summer session.	Provide receipts or verification of successful completion.
<input type="checkbox"/> Illness or injury.	Provide a letter from your doctor.
<input type="checkbox"/> Academic costs that exceed Student Financial Services allowances (tuition, books, other educational costs).	Provide a letter from your educational institution or receipts.

Appeal of Parental/Spousal Contribution

<input type="checkbox"/> Unexpected and unavoidable expenses do not enable parents to contribute the expected amount. (i.e. emergency home repairs or uninsured medical bills)	Complete Section 2 of this form and provide verification to support all major expenses (i.e. receipts, bank statements, etc.)
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Note: Ongoing monthly expenses i.e. mortgage, loans, utilities, food, etc are not an appeal option. Refer to the Moderate Standard of Living Allowance Table in the Expected Parental Contributions Section of the Focus on Your Future guide.

Financial Assistance Requested

Amount of financial assistance received to date for 2006-2007: \$ _____

Amount of additional financial assistance you are requesting for the 2006-2007 academic year: \$ _____

