

SECTION 3 - SPOUSE OF MARRIED/Common-LAW APPLICANT

The information below pertains to the following applicant file:

Applicant SIN <input type="text"/>	Applicant Legal Surname <input type="text"/>	Applicant Legal Given Name <input type="text"/>
---------------------------------------	---	--

For file reference purposes, provide the name and Social Insurance Number of the applicant.

SPOUSE DEMOGRAPHIC

2006

Social Insurance Number (SIN) <input type="text"/>	I do not have HSN <input type="checkbox"/>	Date of Birth Day Month Year <input type="text"/>
Sask. Health Services Number (HSN) <input type="text"/>	I do not have HSN <input type="checkbox"/>	Sask. Driver's License (PIC) No. <input type="text"/>
		I do not have PIC <input type="checkbox"/>
		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Legal Surname <input type="text"/>	Legal Given Name <input type="text"/>	Legal Middle Name <input type="text"/>

Helpful Tips

If you do not have a valid Social Insurance Number (SIN) or Saskatchewan Health Services Number (HSN), check the appropriate box.

Date Graduated or Last Date Attended High School:

Check the box if your address and home telephone number are the same as the applicant's.

Apt # Street/Box No.

City/Town Prov/State Country (other than Canada)

Postal Code/Zip Code Area Code and Home Telephone

Pre-Study and Study Period Information

Check the appropriate box to indicate what you will be doing during the **majority of your spouse's pre-study period.**

- | | |
|--|--|
| <input type="checkbox"/> Employed Full-time | <input type="checkbox"/> Self-employed |
| <input type="checkbox"/> Attending a Post-Secondary School Full-time | <input type="checkbox"/> Employed Part-time |
| <input type="checkbox"/> Attending High School | <input type="checkbox"/> Attending a Post-Secondary School Part-time |
| <input type="checkbox"/> Unemployed | <input type="checkbox"/> Attending ABE (upgrading) |
| <input type="checkbox"/> Home with dependent child 1 year & under | <input type="checkbox"/> Unable to work for medical reasons |

Check the appropriate box to indicate what you will be doing during the **majority of your spouse's study period.**

- | | |
|--|--|
| <input type="checkbox"/> Employed Full-time | <input type="checkbox"/> Self-employed |
| <input type="checkbox"/> Attending a Post-Secondary School Full-time | <input type="checkbox"/> Employed Part-time |
| <input type="checkbox"/> Attending High School | <input type="checkbox"/> Attending a Post-Secondary School Part-time |
| <input type="checkbox"/> Unemployed | <input type="checkbox"/> Attending ABE (upgrading) |
| <input type="checkbox"/> Home with dependent child 1 year & under | <input type="checkbox"/> Unable to work for medical reasons |

I will be a full-time student during 2006/07 and also applying for student loans.

I will be a full-time student during 2006/07 and applying for Provincial Training Allowance (PTA).

If you checked either box above, please indicate the dates you will be attending school:

Day Month Year <input type="text"/>	Day Month Year <input type="text"/>
Start Date	End Date

The pre-study period is generally the four months prior to the start date of your spouse's upcoming program. If your spouse was a full-time student during that period, refer to the instructions.

Full-time employment is 30.9 hours per week. Part-time is anything less than that.

If you are unable to work for medical reasons, you must submit medical documentation.

If you are attending full-time studies and applying for student loans or PTA, remember to check the appropriate box and indicate the program start and end dates.

Spouse Income

Check the box if you will not have any income during your Spouse's pre-study period.

Check the box if you will not have any income during your Spouse's study-period.

Enter the **Total (not monthly)** income before deductions you expect to receive for your spouse's **entire** pre-study period and **entire** study period.

Pre-Study Period Gross Income Study Period Gross Income

Type of Income

Full-time Employment and/or Part-time Employment	\$ _____ .00	\$ _____ .00
Self-Employment (Gross Income minus Operating Expenses)	\$ _____ .00	\$ _____ .00
Income from Rental/Room & Board	\$ _____ .00	\$ _____ .00
Employment Insurance (EI) Benefits/HRSD Income	\$ _____ .00	\$ _____ .00
Resettlement Assistance/Immigration Funding	\$ _____ .00	\$ _____ .00
Survivor/Old Age/Retirement/Disabled Benefits	\$ _____ .00	\$ _____ .00
Workers' Compensation	\$ _____ .00	\$ _____ .00
Social Assistance	\$ _____ .00	\$ _____ .00
Alimony Support	\$ _____ .00	\$ _____ .00
Child Support	\$ _____ .00	\$ _____ .00
Investment Interest/Dividend	\$ _____ .00	\$ _____ .00
Orphan's/Disabled Child Benefits	\$ _____ .00	\$ _____ .00
Indian and Northern Affairs Allowance (INAC)	\$ _____ .00	\$ _____ .00
Indian Band Funding	\$ _____ .00	\$ _____ .00
Transitional Employment Allowance (TEA)	\$ _____ .00	\$ _____ .00
Scholarships. Specify _____	\$ _____ .00	\$ _____ .00
Bursaries. Specify _____	\$ _____ .00	\$ _____ .00
RESP/Scholarship Trust Fund or Other Educational Savings Plan. Specify _____	\$ _____ .00	\$ _____ .00
Other Educational Funding. Specify _____	\$ _____ .00	\$ _____ .00
Other Income. Specify _____	\$ _____ .00	\$ _____ .00

Helpful Tips

List your income during your spouse's pre-study period and study period. If you have no income to claim during either of these periods, remember to check the appropriate boxes.

If your spouse's pre-study period is four months, you must list the total gross income that you receive before deductions for that four month period. If your spouse's pre-study period is only two months, list your total gross income for the two month period only.

Remember to include your financial and vehicle assets in the Applicant Assets section.

Pre-Study Period Employer

Name of Employer		Street Address	
_____		_____	
City/Town	Prov/State	Area Code and Telephone Number	
_____	_____	_____ _ -_____ _	

Study Period Employer

Name of Employer		Street Address	
_____		_____	
City/Town	Prov/State	Area Code and Telephone Number	
_____	_____	_____ _ -_____ _	

WIFE EXPENSE

Enter the **Total (not monthly)** expenses you expect to pay during your spouse's **entire** pre-study period and **entire** study period.

Type of Expense	Pre-Study Period Gross Expenses	Study Period Gross Expenses
Canada-Saskatchewan Integrated Student Loan Payments	\$ _____ .00	\$ _____ .00
Canada Student Loan Payments	\$ _____ .00	\$ _____ .00
Saskatchewan Student Loan Payments	\$ _____ .00	\$ _____ .00
Alimony Support	\$ _____ .00	\$ _____ .00
Child Support	\$ _____ .00	\$ _____ .00

Helpful Tips

Only the expenses listed here will be used in the assessment of your spouse's application.

In claiming Child Support or Alimony, you may not claim more than \$423 per child per month.

DECLARATION BY SPOUSE

I declare that I have answered all questions on this application according to the instructions and my answers and documents I have provided in support of this application, or will provide in the future, are to the best of my information and belief, true in every respect.

I make these declarations knowing it is an offence under the *Canada Student Financial Assistance Act* and *The Student Assistance and Student Aid Fund Act, 1985* of Saskatchewan, to knowingly make any false statement or representation in an application or other document or to furnish any false or misleading information or documentation.

I consent to and authorize the disclosure and release by any person, individual, corporation, organization, or by any government or government agency (including but not restricted to any foreign, federal or provincial government, department or crown corporation), of any information or documents (including any personal information as defined in *The Freedom of Information and Protection of Privacy Act* and any personal health information as defined in *The Health Information Protection Act*) requested by the Province of Saskatchewan for any purpose respecting the administration of financial assistance for the benefit of my applicant spouse by Saskatchewan Advanced Education and Employment or its successors.

I further consent to the Minister of Saskatchewan Advanced Education and Employment or his/her designate to release to any person, individual, corporation, organization or to any government or government agency (including but not restricted to any foreign, federal or provincial government, department or crown corporation), any information or documents (including any personal information as defined in *The Freedom of Information and Protection of Privacy Act* and any personal health information as defined in *The Health Information Protection Act*) for any purpose respecting the administration of financial assistance.

Signature of Spouse

Day Month Year

Date Signed

Signature must appear in ink.

Applications not signed or dated will be returned causing delays in the processing of this application.

CANADA REVENUE AGENCY RELEASE

I hereby consent to the release, by the Canada Revenue Agency to an official of Saskatchewan Advanced Education and Employment, of information from my income tax returns, and if applicable, other required taxpayer information about me, whether supplied by me or by a third party. The information will be relevant to and used solely for the purpose of determining and verifying my applicant spouse's eligibility entitlement for the general administration and enforcement of Student Financial Assistance under the *Canada Student Financial Assistance Act* and *The Student Assistance and Student Aid Fund Act, 1985* of Saskatchewan, and will not be disclosed to any other person or organization without my approval.

This later authorization is valid for the:

- taxation year prior to the year of signature; and
- the current taxation year; and
- each subsequent consecutive taxation year for which assistance is requested by my spouse or on my spouse's behalf.

Signature of Spouse

Social Insurance Number

Day Month Year

Date Signed

Signature must appear in ink.

Applications not signed, dated or missing SIN number will be returned causing delays in the processing of this application.