## SECTION 13 - PARENT/LEGAL GUARDIAN INFORMATION (for dependent students) APPLICANT NAME: | The province/territory of residence for a single dependent student is that in which the parent(s) has most recently lived or maintained the family home for a period of at least 12 consecutive months. If you have lived in the Yukon, there is an expected contribution from the parent(s)/legal quardian(s) based on family income and size. If you are separated/divorced parents please have the parent(s)/legal quardian(s) that the student would normally live with complete the following: 1<sup>st</sup> Parent Information 2<sup>nd</sup> Parent Information Last Name: Given Name: Previous Year's Income: Previous Year's Income Tax Paid: Permanent Mailing Address: City: Country: Prov/Terr/State: \_\_l Telephone: |(\_\_\_\_) Postal / Zip Code: Give a complete breakdown of where you were physically living for the 2 years immediately prior to the start of your child's classes for this academic year. City Territory/Province/State From Country Month Year Month Year List of dependent children including applicant living with you: Residing Shared Attending Name (Last, First) Relationship to You With You Custody Post-Secondary Yes No Yes No Yes No If shared custody when do your dependents live with you? We require a copy of your income tax summary from Revenue Canada or a copy of your income tax form from the previous year. If either of you were unemployed, please indicate other means of income support you are receiving and include supporting documentation. I/We declare that the information that I/we submitted in this form is correct to the best of my/our knowledge. I/We make the declaration knowing that it is an offence under Canada Student Loans Act to knowingly make any false statements or misrepresentation in an application or other documents, or willfully furnish false or misleading information. I/We also understand that signing this form verifies that the information provided is accurate and that I am/we are not co-signing a loan on behalf of the applicant.

Signature of 1st Parent

Year Month Day

Date:

Signature of 2<sup>nd</sup> Parent

Year Month Day