

HELPFUL NOTES TO STUDENTS FOR FILLING OUT THE APPLICATION

- ◆ **If your application is received without all necessary supporting documentation applicable to your situation, it will not be processed and will be returned to you by surface mail. Be sure to read the following notes.**
 - ◆ **Do NOT send in original supporting documentation. Due to the volume of documentation received annually, Student Financial Services (SFS) is unable to return original supporting documentation to you; therefore send copies.**
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NOTE # 1- PERMANENT DISABILITY

If you have a permanent disability you must attach a completed *Permanent Disability Medical Certificate* form to your application. This form is available in the centre of this *"Information Guide and Application"* or on the Internet at www.studentaid.gnb.ca and may also be available at your educational institution.

NOTE # 2 – ABORIGINAL PERSONS OF CANADA

An Aboriginal Person is a North American Indian or a member of a First Nation, a Métis or Inuit. North American Indians or members of a First Nation include status, treaty or registered Indians, as well as non-status and non-registered Indians.

- ◆ A letter from the source, indicating that financial resources for aboriginal persons will be received during your study period, is required to be submitted with your application.
- ◆ The letter must indicate any amounts you expect to receive for monthly maintenance, travel, daycare allowances, tuition, student fees, books and supplies.

NOTE # 3 – PERMANENT RESIDENT

You are able to apply for assistance immediately upon receiving your permanent resident status. However, in order to be considered for the provincial portion of assistance, you must be considered a resident of New Brunswick (see "SECTION 3 – RESIDENCY" of the application). If you are not considered a resident of New Brunswick, and are not considered a resident of another Province/Territory in Canada, complete the application; you will be considered for the federal portion of assistance.

- ◆ Attach a **clear copy** of both sides of your Permanent Resident (PR) card to your application. If you do not have a PR card, attach a clear copy of your Canadian Immigration Record. Should you require information regarding your PR card, you may call 1 800 255-4541. For information on citizenship and immigration, you may call 1 888 242-2100.
- ◆ Permanent Resident students, who have been sponsored into Canada, are required to provide a letter from their sponsor giving the details of the sponsorship.

Students who are in Canada on a Student Visa are **not** eligible to receive Canada/New Brunswick Student Loans and should investigate other funding sources.

NOTE # 4 – PROTECTED PERSONS OF CANADA

You are able to apply for assistance immediately upon receiving your Protected Persons Status Document (PPSD) and your Social Insurance Number (SIN) card showing a 900 series SIN. However, in order to be considered for the provincial portion of assistance, you must be considered a resident of New Brunswick (see "SECTION 3 – RESIDENCY" of the application). If you are not considered a resident of New Brunswick, and are not considered a resident of another Province/Territory in Canada, complete the application; you will be considered for the federal portion of assistance.

- ◆ If you are a Protected Person of Canada (including Convention Refugees), provide a clear copy of both sides of your Protected Persons Status Document (PPSD), which must be valid for the entire period of study for which you are applying for financial assistance. (To obtain an application for a PPSD, you can apply online at www.cic.gc.ca, or to inquire about your recently submitted application to Citizenship and Immigration Canada (CIC), you may call 1 888 242-2100.); **and**
- ◆ A clear copy of your Social Insurance Number (SIN) card, showing a 900 series SIN, must be submitted with your application. If you do not have a SIN card, you must get one before you can apply for student financial assistance. Like your PPSD, your SIN card must be valid for the entire period of study for which you are applying for financial assistance. If you do not have a SIN card, or have one that will expire during your period of study, you can visit your local Service Canada Centre or call 1 800 622-6232 or visit the Human Resources and Social Development Canada Website at www.hrsdc.gc.ca.

NOTE # 5 – REQUEST FOR PROGRAM INFORMATION FORM

You will find a copy of this form in the centre of this *"Information Guide and Application"* or on the Internet at www.studentaid.gnb.ca. A *Request for Program Information* form is required to be completed by the post-secondary educational institution you plan to attend if **any** of the following situations apply to your study period.

- ◆ You are applying to attend INTERSESSION and/or SUMMER SESSION at a university. *Your application cannot be processed without this completed form.*
- ◆ You are applying to attend any private post-secondary educational institution located outside of New Brunswick (any post-secondary educational institution which is not publicly funded – not university or community college). *Your application cannot be processed without this completed form.*
- ◆ You are applying to attend a private post-secondary educational institution located in the Province of New Brunswick. Check with the registrar or financial aid office at the educational institution you plan to attend; they will be able to inform you if a *Request for Program Information* form is required to be submitted with your application.
- ◆ You are applying to attend a public post-secondary educational institution outside the Atlantic Provinces. If the completed form is not provided along with your application, the latest program cost information for your program on file with SFS will be used to avoid delays in processing your application. Once your assessment has been completed, you will receive a *Notice of Assessment*. Review it carefully. If you feel accurate costs have not been used for your program, have your post-secondary educational institution submit a completed *Request for Program Information* form to SFS. It is your responsibility to ensure this form has been sent by your educational institution.

If a *Request for Program Information* form is required, the completed form should be attached to your application to avoid delays in processing. However, should you prefer that your educational institution forward the completed form directly to SFS, be sure to indicate in "SECTION 4 – PROGRAM OF STUDY FOR THE 2007-2008 ACADEMIC YEAR" of the application that you have contacted your educational institution and made arrangements for them to forward the required form directly to SFS. *Your application cannot be processed until this completed form is received by SFS.*

NOTE # 6 – SUCCESSFUL COMPLETION

- ◆ Officials at your post-secondary educational institution determine the percentage of course load in which they consider you to be enrolled.
- ◆ A full-time course load at university is based on credit hours. Normally 5 courses equal 100% course load; 4 courses equal 80% course load; 3 courses equal 60% course load.
- ◆ You may need to contact the registrar at the post-secondary educational institution you attended to determine what percentage of a full-time course load you successfully completed during your study period.

NOTE # 7 – DEPENDANTS

Dependants are:

- ◆ Any children who are 18 years or younger and are wholly dependent on the parent(s) for support and for whom the parent or the parent's partner, in law or in fact, have the custody and control; or
- ◆ Any children who are in a full-time program at a secondary school or a post-secondary educational institution and who fit in the Dependent Student Category (see Dependent Student Category in "SECTION 2 – STUDENT CATEGORY" of the application); or
- ◆ Anyone claimed on the 2006 Income Tax Return as wholly dependent other than your partner.

NOTE # 8 – CARE AND CUSTODY OF THE MINISTER OF FAMILY AND COMMUNITY SERVICES

If you are under the care and custody of the Minister of Family and Community Services you must attach, to your completed application, a letter of verification from that department indicating any financial assistance you will receive from them during your study period.

NOTE # 9 – PARENTAL INCOME INFORMATION

As a dependent student, you are encouraged to include your parent's income information in your application. This will allow your application to be considered for all available federal and provincial programs. However, should you choose not to include this income information, you will be assessed for New Brunswick Student Loans only. Also, if your parent's income information is not included in your application, they are not required to sign the DECLARATION AND CONSENT page of this application (page 10).

NOTE # 10 – MARRIED/Common-LAW PARTNER'S INCOME INFORMATION

As a married or common-law student, you are encouraged to include your partner's income information in your application. This will allow your application to be considered for all available federal and provincial programs. However, should you choose not to include this income information, you will be assessed for New Brunswick Student Loans only. Also, if your partner's income information is not included in your application, he/she is not required to sign the DECLARATION AND CONSENT page of this application (page 10).

SECTION 5 – EDUCATIONAL HISTORY

Graduated from High School _____ or _____ Left High School

_____|_____
YYYY MM

_____|_____
YYYY MM

If you did not graduate from high school, have you received Grade 12 equivalency? Yes _____ No _____

If Yes, indicate date _____
YYYY MM

Have you ever enrolled at a Post-Secondary Educational Institution, taking post-secondary level courses, either as a full-time or part-time student? Yes _____ No _____

If Yes, and you are a first-time applicant, provide the following detailed information for **each year** you have attended a Post-Secondary Educational Institution as a **full-time student**. If you have completed this form on a previous application, you need only provide details of any post-secondary education since your last application.

Complete this section, starting with the latest year attended. If additional space is required, attach additional sheet found in the center of this "Information Guide and Application" or on the Internet at www.studentaid.gnb.ca. If this section is not fully completed, your application cannot be processed.

Year _____ Level of Study * _____ Faculty & Major _____ Did you graduate? Yes _____ No _____

Did you receive a Canada Student Loan during this Period of Study? Yes _____ No _____

Did you successfully complete at least 60% of a full-time course load during this Period of Study? (See **NOTE # 6**) Yes _____ No _____

Name of Institution _____

Name of Program _____ Start Date _____ End Date _____
YYYY MM YYYY MM

Year _____ Level of Study * _____ Faculty & Major _____ Did you graduate? Yes _____ No _____

Did you receive a Canada Student Loan during this Period of Study? Yes _____ No _____

Did you successfully complete at least 60% of a full-time course load during this Period of Study? (See **NOTE # 6**) Yes _____ No _____

Name of Institution _____

Name of Program _____ Start Date _____ End Date _____
YYYY MM YYYY MM

Year _____ Level of Study * _____ Faculty & Major _____ Did you graduate? Yes _____ No _____

Did you receive a Canada Student Loan during this Period of Study? Yes _____ No _____

Did you successfully complete at least 60% of a full-time course load during this Period of Study? (See **NOTE # 6**) Yes _____ No _____

Name of Institution _____

Name of Program _____ Start Date _____ End Date _____
YYYY MM YYYY MM

* Indicate the number of your **level of study** for this period of study: **1 = Certificate** **2 = Diploma** **3 = Bachelor** **4 = Master** **5 = PhD**

OTHER POST-SECONDARY STUDIES: If you were not able to check Yes – you successfully completed at least 60% of a full-time course load for any period of study indicated above or on the additional sheet if applicable, answer the following question.

Have you successfully completed 60% of a full year of post-secondary education within the last 10 years at a Canadian post-secondary institution? (This requirement does not need to be met in a single session, but could be a total of several courses taken during the last 10 years.) Yes _____ No _____

SECTION 6 – PRE-STUDY RESOURCES

Your pre-study period is the number of weeks between study periods, up to a maximum of 18 weeks. Indicate all expected income during your pre-study period. Include any Canada Pension Plan (CPP) or Quebec Pension Plan (QPP) benefits.

<u>If you were in school until</u>	<u>Your pre-study period is</u>	<u>Total income before deductions</u>
April 2007 and classes start in September 2007	May 1, 2007 to September 1, 2007	\$ _____
June 2007 and classes start in September 2007	June 25, 2007 to September 1, 2007	\$ _____
None of the above – Explain:	18 weeks before the start of your classes	\$ _____

Indicate the source(s) of your income before your study period:

Employment Earnings _____ Employment Insurance Benefits _____ Social Assistance _____ CPP/QPP Benefits _____
 Other _____ List source: _____

SECTION 7 – STUDY PERIOD RESOURCES

Do you/will you have any financial resources during your **study period**? Yes _____ No _____

If Yes, provide detailed information as indicated below.

Indicate all income **before deductions** that you expect to receive **during your study period** from the following sources:

- Study Period Employment Earnings – Including all earnings from employment during your Co-Op Work Term or paid practicum, if applicable \$ _____ (Monthly)
- How many months will you work during this study period? _____ (Total number of months)
- Assistantship/Honorarium/Fellowship or Research Grant \$ _____ (Total for this study period)
- Social Assistance \$ _____ (Monthly)
- Support payments that you will receive \$ _____ (Monthly)
- Employment Insurance Benefits \$ _____ (Bi-weekly)
- Savings, Mutual Funds, stocks and bonds, GICs – *Do not include any money saved from your income indicated in Section 6 above* \$ _____ (Total for this study period)
- Scholarships/Bursaries – *Do not include any expected from New Brunswick Student Financial Assistance* \$ _____ Source _____
 \$ _____ Source _____
- RRSPs \$ _____ (Total for this study period)
- Educational Trust Funds or RESPs \$ _____ (Total for this study period)
- Indicate any financial resources you will receive during your study period as an Aboriginal person (See **NOTE # 2**) \$ _____ (Total for this study period)
- Indicate any monthly amounts that you will receive in CPP or QPP benefits:

(a) Due to your disability	\$ _____	(b) Retirement Pension	\$ _____
(c) Due to your parent's disability	\$ _____	(d) Survivor's Benefit	\$ _____
- Will you receive or have you received funding during your study period from the Training and Skills Development Program, under the New Brunswick Department of Post-Secondary Education, Training and Labour? Yes _____ No _____ Unknown _____
- Tuition Reduction – if you are eligible for a reduced tuition fee, you must claim the amount of the reduction. (For example, if your parent is employed by the institution you are attending, you may be charged a reduced tuition fee.) \$ _____
- Indicate total amount and source of any other income or sponsorship, **not indicated above**, you will have during this period of study.
 Total for this study period \$ _____ Are you receiving this income because you are a student? Yes _____ No _____
 Source _____

Refer to the Student Category you determined in Section 2 and go to the next applicable section.

SECTION 8B – INDEPENDENT STUDENTS

1. Before the start of classes for 2007-2008 will you live with your parent? Yes _____ No _____

If no, where?

_____ City or Town

_____ Province/Territory

2. While in classes, will you live with your parent? Yes _____ No _____

3. How far is your parent's home from the school you plan to attend (# of kilometres one way)? _____

4. If you are claiming to be an independent student because you have completed 2 periods of 12 consecutive months in the labour force while not attending a post-secondary educational institution full time, list your employment history for these most recent 2 periods since leaving high school.

From (YYYY/MM)	To (YYYY/MM)	Employer	Province

**ENSURE YOU HAVE COMPLETED SECTIONS 1 TO 7, SECTION 8B AND SECTION 9.
ALL INDEPENDENT STUDENTS MUST READ, SIGN AND RETURN THE DECLARATION AND CONSENT LOCATED ON
PAGES 9 AND 10 OF THIS APPLICATION.**

SECTION 8C – SINGLE PARENT STUDENTS

1. List all dependants in your family unit. (See **NOTE # 7**) Do not list yourself.

First Name	Relationship to you	Age	Name of School or Post-Secondary Educational Institution 2007-2008	Grade Level or Year of Study	Social Insurance Number	Also applying for student financial assistance?

2. While in classes, will you live with your parent? Yes _____ No _____

**ENSURE YOU HAVE COMPLETED SECTIONS 1 TO 7, SECTION 8C AND SECTION 9.
ALL SINGLE PARENT STUDENTS MUST READ, SIGN AND RETURN THE DECLARATION AND CONSENT LOCATED ON
PAGES 9 AND 10 OF THIS APPLICATION.**

SECTION 8D – MARRIED/COMMON-LAW STUDENTS

1. Partner's Last Name _____ First Name _____
 Social Insurance Number _____ Date of Birth _____
 YYY Y MM DD

2. **Financial Information:** To be considered for all available federal and provincial programs, you are required to provide the amounts showing on the following line numbers of your partner's 2006 Income Tax Return. If he/she has not yet filed his/her tax return for the 2006 year, provide the information that he/she will be reporting on these line numbers. (If he/she does not have a copy of their return, he/she may call 1 800 959-8281.) In order to avoid delays, all lines must be completed. **Enter a "0" if there is no amount reported/to be reported.** If you choose not to provide your partner's income information, go to question 3. You will be assessed for New Brunswick Student Loans only (see **NOTE # 10**).

Did your partner file an Income Tax Return for the 2006 year? Yes ____ No ____

CPP or QPP benefits (Line 114)	\$ _____	RRSP income (Line 129)	\$ _____
Employment Insurance and other benefits (Line 119)	\$ _____	Total income (Line 150)	\$ _____
Interest and other investment income (Line 121)	\$ _____	Support payments made – Allowable deduction (Line 220)	\$ _____

Special Note: If your partner believes his/her gross income from January 1, 2007 to December 31, 2007 will be at least 5% lower than the income reported on the 2006 Income Tax Return, he/she may complete the *Parental/Family Contribution Review Form*, found in the centre of this "Information Guide and Application" or on the Internet at www.studentaid.gnb.ca.

3. Before the start of classes for 2007-2008 will you live with your partner? Yes ____ No ____
 4. While in classes, will you live with your partner? Yes ____ No ____

5. Your partner is currently:

- Employed
- Unemployed
- Full-time student not applying for student financial assistance – If your partner is attending full-time post-secondary studies, but is not applying for financial assistance, we require details of his/her pre-study and study period financial resources. Your partner must complete the *Partner's Financial Information* form found in the centre of this "Information Guide and Application" or on the Internet at www.studentaid.gnb.ca.
- Full-time student applying for student financial assistance – If your partner is a full-time student and also applying, send both applications together (one cannot be processed without the other).

6. List all dependants in your family unit. (See **NOTE # 7**) Do not list yourself or your partner.

First Name	Relationship to you	Age	Name of School or Post-Secondary Educational Institution 2007-2008	Grade Level or Year of Study	Social Insurance Number	Also applying for student financial assistance?

ENSURE YOU HAVE COMPLETED SECTIONS 1 TO 7, SECTION 8D AND SECTION 9. ALL MARRIED/COMMON-LAW STUDENTS AND THEIR PARTNER MUST READ, SIGN AND RETURN THE DECLARATION AND CONSENT LOCATED ON PAGES 9 AND 10 OF THIS APPLICATION (See NOTE # 10).

SECTION 9 – DECLARATION AND CONSENT

Please read carefully prior to signing the application. If this section is not completed, it will be returned to you by surface mail.

MUST BE SIGNED BY ALL APPLICANTS

DECLARATIONS

I am hereby applying for financial assistance from the Student Financial Services (SFS) Branch, Department of Post-Secondary Education, Training and Labour, knowing that it is an offence under the *Canada Student Financial Assistance Act*, the *Canada Student Loans Act* and the *Youth Assistance Act* to knowingly make any false statements or misrepresentation in an application or other document, or to wilfully furnish any false or misleading information. I understand that all file information is subject to audit and verification.

I understand that failure to provide complete, accurate or updated information and documentation, or supporting documentation, either in my application or in response to requests for verification or audit purposes, may preclude me from receiving financial assistance in the future, and may result in the cancellation of my current award and/or other benefits, such as bursaries and interest-free status.

I agree to allow SFS to collect personal information about me, whether supplied by me or a third party, including my updated address/telephone number and my academic performance for the period stated on this application or previous periods, as they consider necessary, from any level of government in Canada or elsewhere, educational and financial institutions, and agencies, to use and to exchange such personal information so collected with any educational or financial institution, service or loan provider or agency, or any department or level of government in Canada, but only as required to give effect to this application, including the administration, repayment and collection of any financial assistance arising herefrom.

I agree to notify SFS, in writing, of changes in my period of study, academic information, financial status, or marital status throughout my period of studies.

I agree to use any assistance granted to pay my academic fees, educational costs and living expenses related to my studies, and not accept government student loan assistance from any other provinces or country while receiving assistance authorized by the province of New Brunswick.

I understand that I am responsible for repaying all student loans granted to me.

I acknowledge that any overaward of funding will be recovered, prior to the issuance of any further funding, should SFS find my assessment inaccurate, even if the inaccuracy is a result of an error on my part, or on the part of: my parent(s)/official sponsor(s), partner, my educational institution, or SFS.

I certify that I have read and understood the information provided in the "*Student Financial Assistance for Full-time Post-Secondary Students in New Brunswick Information Guide and Application 2007-2008*".

Signature of Applicant

CONSENT

I authorize release of my personal, academic and financial information to the Canada Millennium Scholarship Foundation, where deemed appropriate, to enable my consideration as a possible candidate for Millennium funding and for the purpose of analyzing the effects of bursaries on low-income students and access to post-secondary education. I authorize the disclosure of the following personal information: name, address, telephone numbers, social insurance number, educational institution attended, value of assessed need, field of study, size of family, number of dependants, date of birth, total award, student status, gender, length of program, year of program, pre-study student work income, and study period student work income to the Canada Millennium Scholarship Foundation, its agents and contractors. I consent to the disclosure and use of this information to the bodies noted above for a total of 3 years, beginning with the first year of study in which I apply for student financial assistance. The results of the research will be published. The Foundation, its agents and contractors undertake to maintain, respect and protect the confidentiality of the personal information received under this Agreement and not to release it to any person without the express written consent of New Brunswick, and the student or parent where applicable.

If I am not awarded Millennium funding, I consent to the disclosure of personal information for the purpose of analyzing the effects of bursaries on low-income students and access to post-secondary education. I authorize the disclosure of the following personal information: name, address, telephone numbers, social insurance number, educational institution attended, value of assessed need, field of study, size of family, number of dependants, date of birth, total award, student status, gender, length of program, year of program, pre-study student work income, and study period student work income to the Canada Millennium Scholarship Foundation, its agents and contractors. I consent to the disclosure and use of this information to the bodies noted above for a total of 3 years, beginning with the first year of study in which I apply for student financial assistance. The results of the research will be published by the Foundation. The Foundation, its agents and contractors will comply with the provisions of the New Brunswick *Protection of Personal Information Act* (the "Act") and will not release personal information except where authorized under the provisions of the Act.

Signature of Applicant

Social Insurance Number

Date

20 ____

ALL APPLICANTS MUST SUBMIT THIS PAGE WITH THE APPLICATION FORM

SECTION 9 – DECLARATION AND CONSENT continued

**CANADA REVENUE AGENCY AUTHORIZATION
MUST BE SIGNED BY ALL APPLICANTS AND THE PARENT(S)/STEP-PARENT(S)/GUARDIAN(S) OF DEPENDENT STUDENT
APPLICANTS OR PARTNER OF MARRIED/Common-LAW STUDENT APPLICANTS**

This tax release declaration authorizes Canada Revenue Agency to release to Student Financial Services, Department of Post-Secondary Education, Training and Labour, information from income tax returns and other taxpayer information. The information will be relevant to, and used solely in the determination and verification of eligibility, and the general administration and enforcement of the New Brunswick Student Financial Assistance Program under the *Youth Assistance Act*. This authorization is valid for the taxation year prior to the year of signature of this consent, the year of signature, and each subsequent taxation year for which assistance is requested.

<input type="text"/>	<input type="text"/>	<input type="text" value="20 ____"/>
Signature of Applicant	Social Insurance Number	Date

<input type="text"/>	<input type="text"/>	<input type="text" value="20 ____"/>
Signature of Parent or Partner (See NOTES # 9 and 10)	Social Insurance Number	Date

<input type="text"/>	<input type="text"/>	<input type="text" value="20 ____"/>
Signature of Parent	Social Insurance Number	Date

Note: The signatures of both parents are required, if applicable.

**MUST BE SIGNED BY PARENT(S)/STEP-PARENT(S)/GUARDIAN(S) OF DEPENDENT STUDENT APPLICANTS OR PARTNER
OF MARRIED/Common-LAW STUDENT APPLICANTS**

DECLARATIONS

I have given complete and true information, knowing that it is an offence under the *Canada Student Financial Assistance Act*, the *Canada Student Loans Act* and the *Youth Assistance Act* to knowingly make any false statements or misrepresentation in an application or other document, or to wilfully furnish any false or misleading information.

I agree to allow the Student Financial Services (SFS) Branch, Department of Post-Secondary Education, Training and Labour, to collect information about me and exchange information about me, as they consider necessary, from any level of government in Canada or elsewhere, educational institution(s), service or loan provider(s), or agencies.

I understand that SFS, when completing a request for a review of the applicant's financial assistance, may disclose my financial information to the applicant.

I understand that I am not liable for government student loans granted to the applicant.

<input type="text"/>	<input type="text"/>
Signature of Parent or Partner (See NOTES # 9 and 10)	Signature of Parent

CONSENT

I consent to the disclosure of personal information for the purpose of analyzing the effects of bursaries on low-income students and access to post-secondary education. I authorize the disclosure of my total income (if applicable) to the Canada Millennium Scholarship Foundation, its agents and contractors. I consent to the disclosure and use of this information to the bodies noted above for a total of 3 years, beginning with the first year of study in which my son/daughter applies for student financial assistance. The results of the research will be published by the Foundation. The Foundation, its agents and contractors will comply with the provisions of the New Brunswick *Protection of Personal Information Act* (the "Act") and will not release personal information except where authorized under the provisions of the Act.

<input type="text"/>	<input type="text"/>	<input type="text" value="20 ____"/>
Signature of Parent (See NOTE # 9)	Social Insurance Number	Date

<input type="text"/>	<input type="text"/>	<input type="text" value="20 ____"/>
Signature of Parent	Social Insurance Number	Date

Note: The signatures of both parents are required, if applicable.

ALL APPLICANTS MUST SUBMIT THIS PAGE WITH THE APPLICATION FORM