

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.

- ◆ If you will receive any financial resources for aboriginal persons during your study period, a letter from the source of this funding is required to be submitted to SFS.
- ◆ 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. For information on citizenship and immigration programs and services, including the PR Card program, contact Citizenship and Immigration Canada at 1-888-242-2100 or visit their Web site at www.cic.gc.ca.
- ◆ 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 that begins with a "9". 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. (For information on citizenship and immigration programs and services, contact Citizenship and Immigration Canada at 1-888-242-2100 or visit their Web site at www.cic.gc.ca); and
- ◆ A clear copy of your SIN card that begins with a "9" 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, call 1-800-622-6232 or visit the Service Canada Web site at www.servicecanada.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 2008-2009 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 2007 Income Tax Return as wholly dependent other than your partner.

NOTE # 8 – CARE AND CUSTODY OF THE MINISTER OF SOCIAL DEVELOPMENT

If you are under the care and custody of the Minister of Social Development 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 11).

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 11).

NEW BRUNSWICK STUDENT FINANCIAL ASSISTANCE APPLICATION FOR FULL-TIME STUDY 2008-2009



For classes beginning between August 1, 2008 and July 31, 2009

- ◆ Information is being collected for the purpose of determining eligibility for student financial assistance including eligibility for Canada Millennium funding.
- ◆ Your completed application with all required information must be received a minimum of **four weeks** before the start date of your program in order to receive notice of your funding for the start of classes.
- ◆ If this application is received without all applicable sections complete, including all supporting documentation, it will be returned to you by surface mail. Read the Helpful Notes to Students found on the previous pages.
- ◆ The issuance of student financial assistance does not sanction the quality of a post-secondary program or the educational institution. Students are encouraged to make informed choices, as student loans are repayable.
- ◆ This application must be completed by the STUDENT in INK. Print clearly.

SECTION 1 – PERSONAL INFORMATION

Social Insurance Number Date of Birth

YYYY	MM	DD

Legal Last Name _____ Legal First Name _____ Middle Initial _____

Gender Male Female Language Preference English French

Your Marital Status (as of first day of classes)
Single Married Separated Divorced Widowed Single Parent Common-law

For the purpose of completing this application, the term "parent" refers to parent(s), step-parent(s) or guardian(s); the term "partner" refers to spouse or common-law partner; the term "educational institution" refers to the post-secondary educational institution in which you are enrolled or plan to enrol.

Your Mailing Address

Keep SFS informed of any changes in this address.

Civic (Street) Address or PO Box Apt. No.

City/Town

Province/Territory Country Postal Code

() _____
Telephone No. Mother's Maiden Name

E-mail Address

Alternate Contact Information

Do not list your partner or children.

Last Name First Name(s)

Mailing Address (if different from your mailing address)

Civic (Street) Address or PO Box Apt. No.

City/Town

Province/Territory Country Postal Code

() _____
Telephone No. Relationship to you

Do you have a permanent disability? (See **NOTE # 1**) Yes No

Are you a Canadian citizen? Yes No

If **No**, are you a Permanent Resident? (See **NOTE # 3**) Yes No

Are you a Protected Person of Canada? (See **NOTE # 4**) Yes No

Indicate if you have previously cashed a government student loan. Yes No

If Yes, from which Province or Territory _____ Latest year cashed _____

INCOME TAX INFORMATION

Did you file an Income Tax Return for the 2007 year? Yes No

The amounts showing on the following line numbers of your 2007 Income Tax Return are required. If you have not yet filed your tax return for the 2007 year, provide the information that you will be reporting on these line numbers. (If you do not have a copy of your return, call the Canada Revenue Agency at 1-800-959-8281.) **Enter "0" if there is no amount reported/to be reported.**

114 CPP/QPP \$ <input style="width: 80px;" type="text"/>	121 Interest/Investment \$ <input style="width: 80px;" type="text"/>	150 Total Income \$ <input style="width: 80px;" type="text"/>	Spouse/Common-law Partner Amount \$ <input style="width: 80px;" type="text"/>
119 EI/Other Benefits \$ <input style="width: 80px;" type="text"/>	129 RRSP \$ <input style="width: 80px;" type="text"/>	220 Support Payments \$ <input style="width: 80px;" type="text"/>	

SECTION 2 – STUDENT CATEGORY

SIN

To properly complete this application, you must first know your student category. Read the statements in the list below. Place a check mark (✓) beside the first statement appearing in the list that best describes what your situation will be on the first day of the study period for which you are applying. (You should have only one statement marked ✓.)

Your student category is:

- **Married or Common-law** If you and your partner
 - Are married;
 - Are receiving social assistance as a family unit from the Department of Social Development, and are currently living common-law;
 - Claimed your marital status as common-law on your 2007 Income Tax Return;
 - Are the natural parents of children living in the same household for whom you are financially responsible.

- **Single Parent** If you are
 - Separated / divorced and have legal and/or physical custody and responsibility for dependent children who live with you. (See **NOTE # 7**)
 - Widowed and have legal and/or physical custody and responsibility for dependent children who live with you. (See **NOTE # 7**)
 - A single parent.

- **Independent Student** If you
 - Have been out of high school for 4 years;
 - Have completed 2 periods of 12 consecutive months in the labour force (working or actively seeking employment) while not studying full time at a post-secondary educational institution;
 - Have no legal guardian or sponsor, and your parents are deceased;
 - Are separated / divorced / widowed and do not have legal custody of any children;
 - Are under the care and custody of the Minister of Social Development. (See **NOTE # 8**)

- **Dependent Student** None of the above statements apply to you.

SECTION 3 – RESIDENCY

SIN

You must apply for student financial assistance to the province/territory in which you are considered a resident. (Permanent Resident – see NOTE # 3; Protected Person of Canada – see NOTE # 4.) Find your student category in the left hand column and answer all questions applicable to that student category.

Your student category is:

• **Dependent**

- (i) Indicate the last place your parent lived for 12 consecutive months prior to the first day of your study period for the 2008-2009 academic year. If your parent lives/lived outside Canada – ie: with the Armed Forces – indicate where your parent last resided or maintained the family home for 12 consecutive months before leaving Canada.

Province / Territory (or Country, if not in Canada) _____ If not NB, indicate dates
from _____ to _____
YYYY MM YYYY MM

- (ii) If you did not indicate New Brunswick in Section (i), did you remain in New Brunswick to begin or continue post-secondary education within 12 months of the date your parent left New Brunswick?

Yes _____ No _____

If you indicated New Brunswick in section (i) or answered yes to section (ii), you are considered a New Brunswick resident – continue completing this application. If you did not indicate New Brunswick in section (i) or answered no to Section (ii), you are not considered a resident of New Brunswick. You must apply to the province/territory you have indicated. For other provincial/territorial contact information visit www.canlearn.ca.

• **Single Parent or Independent**

Indicate the last province or territory in Canada you lived for 12 consecutive months prior to the first day of your study period for the 2008-2009 academic year (while not studying full time at a post-secondary educational institution).

Province / Territory _____ If not NB, indicate dates
from _____ to _____
YYYY MM YYYY MM

If you indicated New Brunswick you are considered a resident of New Brunswick – continue completing this application. If you did not indicate New Brunswick, you must apply to the province/territory you have indicated. For other provincial/territorial contact information visit www.canlearn.ca.

• **Married or Common-law**

- A. If either of the following statements applies to your situation, you are **not** considered a resident of New Brunswick and must apply to the province/territory where your partner is considered to be a resident. For provincial/territorial contact information, visit www.canlearn.ca.

- You are studying outside New Brunswick, your partner is living in the same province/territory where you are studying, and your partner is and has been employed in that province/territory for at least 12 consecutive months before the start of your study period, **or**
- Your partner is also studying full time at a post-secondary educational institution and is considered a resident of another province/territory and you are attending a post-secondary educational institution in the province/territory in which your partner is considered a resident.

- B. If neither of these two statements above applies to your situation, complete the following:

As of the first day of your study period for the 2008-2009 academic year, the last place you and your partner lived for 12 consecutive months, while not studying full time at a post-secondary educational institution, was:

- (i) **Applicant**

Province / Territory (or Country, if not in Canada) _____ If not NB, indicate dates
from _____ to _____
YYYY MM YYYY MM

- (ii) **Partner**

Province / Territory (or Country, if not in Canada) _____ If not NB, indicate dates
from _____ to _____
YYYY MM YYYY MM

- (iii) You are studying in New Brunswick and New Brunswick was not the province in which you last lived for 12 consecutive months while not studying full time at a post-secondary educational institution; however, your partner is living in New Brunswick, is and has been employed in New Brunswick for at least 12 consecutive months prior to the first day of the study period for which you are applying.

Yes _____ No _____

If you indicated New Brunswick in section (i) or (ii), or answered yes to section (iii), you are considered a resident of New Brunswick – continue completing this application. If you did not indicate New Brunswick, you must apply to the province/territory you have indicated. For other provincial/territorial contact information visit www.canlearn.ca.

SECTION 5 – EDUCATIONAL HISTORY

SIN

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.

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 to the question "Did you successfully complete at least 60% of a full-time course load during this Period of Study?" 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 8B – INDEPENDENT STUDENTS

SIN

1. Before the start of classes, 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 10 AND 11 OF THIS APPLICATION.

SECTION 8C – SINGLE PARENT STUDENTS

SIN

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 2008-2009	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 10 AND 11 OF THIS APPLICATION.

SECTION 8D – MARRIED/COMMON-LAW STUDENTS

SIN

1. Partner's Last Name _____

First Name _____

Social Insurance Number

Date of Birth _____
YYYY 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 2007 Income Tax Return. If he/she has not yet filed his/her tax return for the 2007 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 the Canada Revenue Agency at 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 2007 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, 2008 to December 31, 2008 will be at least 5% lower than the income reported on the 2007 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, 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 2008-2009	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 10 AND 11 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 *Post-Secondary Student Financial 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 2008-2009*".

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 *Post-Secondary Student Financial 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 *Post-Secondary Student Financial 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