

# 2008–2009 Application for Financial Assistance

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

PLEASE PRINT CLEARLY IN INK

All applicants must complete pages 1, 2, 3, 4, and 5.

## PERSONAL DATA

Social Insurance Number \_\_\_\_\_

Student Assistance File Number \_\_\_\_\_

Gender  Female  Male

Last name \_\_\_\_\_

First names (Underline name used.) \_\_\_\_\_

Previous last name \_\_\_\_\_

Citizenship:  Canadian  Landed Immigrant/Permanent Resident  
 Protected Person

Birth date (DD/MM/YYYY) \_\_\_\_\_

If you are applying for the first time, send a copy of your Record of Landing IMM 1000 or Confirmation of Permanent Residence form.

**Marital Status** Indicate what your marital status will be on the last day of the month before your classes begin (e.g., if you start classes in September 2008, your status as of August 31, 2008).

If this is your **first application** for a student loan, you do not need to send documents. If you **applied before and your marital status has changed** since your last application send a copy of the document listed in brackets beside your category.

- Single
- Married (Marriage certificate) Date \_\_\_\_\_
- Separated (Separation agreement)

- Divorced (Divorce agreement)
- Widowed (Spouse's death certificate)
- Common-law (Your and your spouse's 2007 income tax returns to show you are common-law) Date \_\_\_\_\_

### Address of Parents or Next of Kin

Next of kin MUST reside in Canada. List one of your parents as next of kin. Do not list your spouse or children.

Last name of next of kin \_\_\_\_\_ First name(s) \_\_\_\_\_

Street address or P.O. Box \_\_\_\_\_

City/Town \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Area code and telephone number \_\_\_\_\_ Relationship of next of kin \_\_\_\_\_

### Mailing Address

If you do not want your mail to go to your next of kin's address, give your mailing address.

Street address or P.O. Box \_\_\_\_\_

City/Town \_\_\_\_\_

Province/State \_\_\_\_\_ Postal Code \_\_\_\_\_

Area code and telephone number \_\_\_\_\_

E-mail \_\_\_\_\_

Have you applied for a Canada Student Loan before?  Yes  No  
In which years? \_\_\_\_\_

If yes, did you receive a loan?  Yes  No  
If yes, from which province? \_\_\_\_\_

Do you wish to declare yourself as a student with a permanent disability?  Yes  No

If yes, you must send a **Medical Assessment Form** (if you have not previously), which is available from our office or can be downloaded from our website.

**Student Category** Select your student category. For help, refer to the information on pages 3, 4, and 5 of this Student Assistance Guide, or see Student Loan Information on our website. (Schedules A to C are on pages A-6 to A-8.)

- (MD)** You are married with dependent children. (Send Schedules A & C)
- (MN)** You are married without dependent children. (Send Schedule C)
- (CD)** You are in a common-law relationship with dependent children. (Send Schedules A & C)
- (CN)** You are in a common-law relationship without dependent children. (Send Schedule C)
- (SP)** You are a single parent. (Send Schedule A)
- (IM)** You are widowed, separated or divorced and are not the custodial parent of any children.
- (IS)** You have been out of highschool for at least 48 months.

- (IN)** you have not been a Full-Time Student (in high school or post secondary schools) for 12 consecutive months on 2 or more occasions.
- (ID)** You are a current or former ward of a government agency or **BOTH** of your parents are deceased.
- (DE)** None of the above statements apply to you. You are a single dependant student. (Send Schedules A & B)

What province do your parents live in? \_\_\_\_\_

What province did they last live in for 12 months? \_\_\_\_\_

If they have lived less than 12 months in that province, when did they move there? \_\_\_\_\_

(DD/MM/YYYY)

**EDUCATION HISTORY** (COMPLETE EDUCATION HISTORY IN CHRONOLOGICAL ORDER)

Name of high school	Province/Country	Start Date		End Date		Highest Grade Completed	Did you graduate?
		Month	Year	Month	Year		
							<input type="checkbox"/> Yes <input type="checkbox"/> No

Name of post-secondary school (complete a new table for each school) \_\_\_\_\_ Province/Country \_\_\_\_\_  
 Level of study:  Certificate/Diploma  Bachelors  Masters  PhD

Name of program (complete a new table for each program)								
	Start Date		End Date		Full Time		Did you receive a student loan?	Did you graduate?
	Month	Year	Month	Year				
Year 1					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year 2					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year 3					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year 4					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year 5					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Name of post-secondary school (complete a new table for each school) \_\_\_\_\_ Province/Country \_\_\_\_\_  
 Level of study:  Certificate/Diploma  Bachelors  Masters  PhD

Name of program (complete a new table for each program)								
	Start Date		End Date		Full Time		Did you receive a student loan?	Did you graduate?
	Month	Year	Month	Year				
Year 1					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year 2					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year 3					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year 4					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year 5					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Name of post-secondary school (complete a new table for each school) \_\_\_\_\_ Province/Country \_\_\_\_\_  
 Level of study:  Certificate/Diploma  Bachelors  Masters  PhD

Name of program (complete a new table for each program)								
	Start Date		End Date		Full Time		Did you receive a student loan?	Did you graduate?
	Month	Year	Month	Year				
Year 1					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year 2					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year 3					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year 4					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Year 5					<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**EMPLOYMENT HISTORY SINCE HIGH SCHOOL** (Begin with the most recent date and list each period you were **employed or unemployed**. Make a new entry each time you changed employment or moved to another province/country. If you need more space, attach a separate sheet.)

Start Date	End Date	Part or Full Time (circle)	Name of employer (or state unemployed)	Province (Country)
Month Year	Month Year			
		Part Full		
		Part Full		
		Part Full		
		Part Full		
		Part Full		

## Program Information

Institution you plan to attend during the 2008–2009 academic year

Area code and telephone

Fax

Address (Street or P.O. Box)

City/Town

Province/State

Country

Postal Code

Student/School I.D. number, if known

Name of degree/diploma/certificate

Faculty or major, if applicable

2008–2009 study term:

Begins (MM/YYYY)

Ends (MM/YYYY)

Number of credit/hrs you will be taking: \_\_\_\_\_

You are entering year \_\_\_\_\_ of a \_\_\_\_\_ year program.  
(e.g., year 1 of a 4-year program)

When do you expect to graduate? \_\_\_\_\_ (MM/YYYY)

Are you in a co-op program?  Yes  No

Co-op work term (if applicable):

Begins (MM/YYYY)

Ends (MM/YYYY)

Are you taking your program through correspondence or distance education?  Yes  No If yes, province/state you will reside while studying: \_\_\_\_\_

## Costs While Studying

Tuition: \$ \_\_\_\_\_ (A maximum cost will be allowed for books.)

Are you receiving a \*tuition waiver?  Yes  No If yes, claim the amount of the waiver on page A-4 under Study Period Income.

Alimony/Child support:

All files are subject to audit. If audited, you must send proof of the alimony/child support payments—  
for example, a copy of the court order or agreement and proof that you are making the payments.

\$ \_\_\_\_\_/month

(e.g., cancelled cheques or money orders)

While in school I will be living with parents or spouse. Distance to school: \_\_\_\_\_ Km one way

While in school I will be living away from parents or spouse. Distance to school: \_\_\_\_\_ Km one way

Distance from your parents' or spouse's to school: \_\_\_\_\_ Km one way

**\*TUITION WAIVER:** If you are eligible for a reduced tuition fee, you must claim the amount of the reduction. This is considered a tuition waiver. In some cases, students whose parents are employed by the institution or whose siblings attend the same institution may be eligible for a reduction in their fees.

## Motor Vehicle Information

Are you the owner or principal operator of a motor vehicle?  owner  principal operator

If yes, year, make & model: \_\_\_\_\_

License number: \_\_\_\_\_

Date purchased: \_\_\_\_\_ (MM/YYYY)

Amount owing: \$ \_\_\_\_\_

Monthly payments: \$ \_\_\_\_\_ per month

## Canada Millennium Scholarship Foundation Bursary Program

Is this your first time attending post-secondary study?  Yes  No

If no, have you successfully completed 60% of a full year of post-secondary education?  Yes  No (If yes, complete the following.)

Name of institution

Name of program

Last year of full-time attendance:

From (MM/YYYY)

To (MM/YYYY)

University—number of credits received: \_\_\_\_\_

Community college/Private career college

Did you successfully complete all the required courses?  Yes  No

Did you receive a diploma/certificate?  Yes  No

## Pre-Study Income

Your pre-study period is the number of weeks between study periods. If you are starting classes in September 2008 and you were in high school until the end of June 2008, your pre-study period is 8 weeks (July and August). If you were in school until the end of April 2008, your pre-study period is 18 weeks (May through August). The maximum number of pre-study weeks is 18. If you were not in school last year, report your gross income for the 18-week period before you will begin school in 2008–2009. **Report income before deductions.**

Gross income from employment: \$ \_\_\_\_\_ Canada Pension Benefits: \$ \_\_\_\_\_  
 Employment Insurance Benefits: \$ \_\_\_\_\_ Other pension, name source: \_\_\_\_\_ \$ \_\_\_\_\_  
 Social Assistance (Provincial Employment Support/Income Assistance) \$ \_\_\_\_\_ Other income, name source: \_\_\_\_\_ \$ \_\_\_\_\_

## Study Period Income

STUDY PERIOD:

\_\_\_\_\_ | \_\_\_\_\_  
 Begins (MM/YYYY) Ends (MM/YYYY)

**Claim the total income for this period.**

All files are subject to audit. You may be required to send proof of your income if your file is audited. Unreported income may result in overawards.

### Part-time earnings

(includes demonstratorships/assistantships): \$ \_\_\_\_\_  
 Name source \_\_\_\_\_

**Scholarships/fellowships/bursaries:** \$ \_\_\_\_\_  
 Name source \_\_\_\_\_

**Education/University Trust Fund:** \$ \_\_\_\_\_

**Tuition Waiver:** \$ \_\_\_\_\_

**Investments** (Claim the total value of savings, bonds, GIC's, term deposits, shares, etc. Do not claim savings from your pre-study period): \$ \_\_\_\_\_

**Canada Pension Benefits:** \$ \_\_\_\_\_

Are you receiving these benefits because your parent(s) are disabled or deceased?  Yes  No

**Other pension:** \$ \_\_\_\_\_  
 Name source: \_\_\_\_\_

**Employment Insurance Benefits:** \$ \_\_\_\_\_

**Social Assistance** (Provincial Employment Support/Income Assistance): \$ \_\_\_\_\_

**Other educational allowance:** \$ \_\_\_\_\_  
 Name source: \_\_\_\_\_

**RRSP** (Claim total amount of your RRSPs, \*see note below regarding exemption): \$ \_\_\_\_\_

Are you requesting the exemption?  Yes  No

If yes, how many years in the workforce? \_\_\_\_\_

**Other:** \$ \_\_\_\_\_  
 Name source: \_\_\_\_\_

**\*RRSP EXEMPTION:** if you contributed to RRSPs while you were in the work force full time (e.g., not a full time student) and you will not be withdrawing these funds during your study period, you are eligible for an exemption of \$2000 for each year you were in the work force full time. If you contributed to RRSPs and have not been in the work force full time for 12 consecutive months, you are not eligible for this exemption.

## Student's Income Tax Data

Did you file a 2007 income tax return?  Yes  No If no, explain: \_\_\_\_\_

You **MUST** complete this section or attach a copy of your 2007 Income Tax Return. Not completing this section correctly may cause delays in processing your application.

Provide the amounts from the following **line numbers** on your 2007 Income Tax Return.

Income	Dividends	RRSP	RRSP Contribution
101 <input type="text"/>	120 <input type="text"/>	129 <input type="text"/>	208 <input type="text"/>
Other_Emp_Income	Interest	130 Other_Income	Ded Elected Split-Pension
104 <input type="text"/>	121 <input type="text"/>	<input type="text"/>	210 <input type="text"/>
CPP	Rental	Specify source of line 130:	Allowable Deductions
114 <input type="text"/>	126 <input type="text"/>	_____	220 <input type="text"/>
Other Pension	Capital Gains	Workers' Comp	Sup Payments Made
115 <input type="text"/>	127 <input type="text"/>	144 <input type="text"/>	230 <input type="text"/>
Elected Split-Pension	Sup Taxable Amt	Social Assist	Spouse
116 <input type="text"/>	128 <input type="text"/>	145 <input type="text"/>	303 <input type="text"/>
EI	Sup Payments Rec	Total Income	Equiv. to Spouse
119 <input type="text"/>	156 <input type="text"/>	150 <input type="text"/>	305 <input type="text"/>

**Making changes to your application:** You can write us and tell us most changes—you don't always need to complete a new application. For example, if your costs increase or your income decreases, you can write us and send proof of the changes. If you change schools or are applying for another period of study (e.g., Co-op study term) you will need to complete another application.

## Declaration and Consent (All Students)

This is a legal document. Please read it carefully.  
Sign it only after you understand and agree to it.

Refer to "Terms and Conditions" on pages 7 and 8 of the guide for definitions of terms and additional information about this agreement.

**I declare:** All of the information provided on my application for student assistance is true and complete.

**I consent:** The educational institution that I am attending may share information about my academic standing, attendance, awards, accommodations, and financial status with the Nova Scotia Student Assistance Office. / The Nova Scotia Student Assistance Office may share information about my award, as well as details about the calculation of the award, with the educational institution that I am attending. / The Nova Scotia Student Assistance Office may collect and exchange my information, including my personal information, with federal and provincial/territorial government departments or agencies in Canada or any other country, and their agents; financial institutions; credit bureaus or reporting agencies; the Canada-Nova Scotia Post-Secondary Education Access Trust; the Canada Millennium Scholarship Foundation and its agents, for the purpose of administration of my assistance, research, and program evaluation.

**I acknowledge:** I am applying for a student loan under the Nova Scotia Student Assistance Program and that I may not accept student assistance from any other province, territory, or country while receiving assistance from the Nova Scotia Student Assistance Program. / In the general administration and enforcement of the Nova Scotia Student Assistance Program, my information, including personal information, may be exchanged by and between the Nova Scotia Student Assistance Office with federal and provincial/territorial government departments or agencies in Canada or any other country, and their agents; financial institutions; credit bureaus or reporting agencies; the Canada-Nova Scotia Post-Secondary Education Access Trust; the Canada Millennium Scholarship Foundation and, its agents for use in administration, research, and evaluations related to student assistance programs, whether or not I am approved for any financial assistance. / My information will be verified through the Social Insurance Registry and the Canada Revenue Agency. / It is an offense under the *Canada Student Financial Assistance Act*, the *Canada Student Loans Act*, and the *Nova Scotia Student Aid Act* to make any false statements or misrepresentations in an application for financial assistance or any other related document, or to willfully provide false or misleading information. / Failure to provide complete, accurate, or updated information and

documentation, either in my application or in response to requests for verification for audit purposes, may preclude me from receiving financial assistance in the future and/or may result in the cancellation of my current award and/or other benefits, such as grants and Interest-Free Status.

**I agree:** I will notify the Nova Scotia Student Assistance Office in writing of changes in my academic information, financial status, or marital status throughout my period of studies. / I will use any money that I receive from this student loan only for costs directly connected with my education as recognized by the Nova Scotia Student Assistance Program. / I will repay all or part of the assistance received if the Nova Scotia Student Assistance Office determines that it was awarded in error, even if it as a result of an inadvertent error on my part or on the part of my parent(s), official sponsor(s) or spouse or common-law partner, on the part of my educational institution, or on the part of the Nova Scotia Student Assistance Office.

## Nova Scotia Student Loan Agreement

**In consideration of my being awarded Nova Scotia student assistance, the sufficiency of which is hereby acknowledged, I agree as follows:**

I will repay the Province the full amount of all Nova Scotia student loans disbursed to me, or on my behalf, as set out in the Explanation of Assessment and any revised Explanation of Assessment issued to me, together with interest on such amounts, in accordance with the Terms and Conditions of this agreement (pages 7 and 8). / I will repay to the Province any amounts that were previously disbursed under the Nova Scotia Student Assistance Program. / I will ratify any agreements or promissory notes that I entered into under the Nova Scotia Student Assistance Program while I was a minor. If I am a minor, I hereby agree to ratify and affirm any agreements or promissory notes that I am entering into and to be bound by the same when I reach the age of majority.

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Social Insurance Number

\_\_\_\_\_  
Date

## Declaration and Consent (Single Dependent and Married/Common-Law Students)

- If you are a **Single Dependent Student** whose parents are married to one another, both parents must sign this form.
- If you are a **Married/Common-Law Student** your spouse must sign this form.

**I declare:** All the information I have sent with this application is correct to the best of my knowledge. I know that it is against the law to give false or misleading information in the application.

**I consent to release the following tax information:** I hereby consent to the release, by the Canada Revenue Agency to an official of the Nova Scotia Department of Education, 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 the applicant's eligibility, entitlement for, and the general administration and enforcement of the student assistance program under the *Canada Student Loans Act*, the *Canada Student*

*Financial Assistance Act*, and the *Nova Scotia Student Aid Act* and will not be disclosed to any other person or organization without my approval. This authorization is valid for the taxation year prior to the year of signature, the year of this application, and each subsequent consecutive taxation year for which assistance is requested. I understand that if I wish to withdraw this consent, I may do so at any time by writing to the Director, Student Assistance, Department of Education, Student Assistance Office, P.O. Box 2290, Halifax Central, Halifax, Nova Scotia, B3J 3C8. This consent may not be withdrawn with respect to loans, grants, bursaries, scholarships, or other benefits that the applicant has actually received.

**I understand:** In the general administration and enforcement of the Student Assistance program, my personal information may be exchanged by and between the Nova Scotia Student Assistance Office, and its agents, all other provincial and federal government departments and the Canada Millennium Scholarship foundation for use in administration, research, statistical analysis, and evaluations related to student assistance programs, whether or not I am approved for any financial assistance.

\_\_\_\_\_  
**Signature 1**

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Social Insurance Number

\_\_\_\_\_  
**Signature 2**

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Social Insurance Number

\_\_\_\_\_  
Relationship to applicant: Father, Stepfather, Mother, Stepmother, Guardian, Spouse, Other (specify relationship) \_\_\_\_\_

Did you file a 2007 Income Tax Return?  Yes  No

\_\_\_\_\_  
Date of Birth (DD/MM/YYYY)

\_\_\_\_\_  
Relationship to applicant: Father, Stepfather, Mother, Stepmother, Guardian, Spouse, Other (specify relationship) \_\_\_\_\_

Did you file a 2007 Income Tax Return?  Yes  No

\_\_\_\_\_  
Date of Birth (DD/MM/YYYY)

**SCHEDULE A—Dependents' Information** (Attach a separate sheet if you need more space.)

**Single Dependent Students**—list your parents' dependents (your siblings) excluding yourself

**Single Parent and Married Students**—list your dependents (your children)

Name	Age	Relationship to parent	If the dependent will be studying FULL TIME at a post-secondary institution in 2008-09, complete the boxes below.		
			School attending	Social Insurance Number	Applying for aid?
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

**Single Parent and Married Students Only:**

Do you pay child care costs?  Yes  No If yes, how much will you pay during your study period? \$ \_\_\_\_\_ weekly.

**All files are subject to audit.** If audited, you must provide cancelled cheques, copies of money orders, or a letter from a licensed day care. If you are unable to provide this information the cost will be disallowed and may result in overawards.

**Who You Can Claim as a Dependent**

You can claim anyone Revenue Canada accepts as a dependent on your income tax return. Dependents include children who are

- 18 years of age or under and who are wholly dependent on the parent or guardian for support and for whom the parent or guardian has, by law or in fact, the custody and control
- 19 years of age or older and are in a full-time program at a post-secondary institution and who fit into the single dependent student category (See Student Loan Information on the Student Assistance website.)
- 19 years of age or older, who live at home at least 51% of the time, and who, even if not in school, fit in the single dependent student category described in Student Loan Information on the Student Assistance website

**Married/Common-Law Students and Single Parents**

**Child Care Costs**

All files are subject to audit. To prove child care costs, if audited, you must provide cancelled cheques, copies of money orders, or a letter from the licensed day care. If you are unable to provide this information, the cost will be disallowed and may result in overawards. See Student Loan Information on our website for more information on allowable child care costs.

Child care costs are allowed for children 11 years and under if there is no parent at home. For example, child care costs are not allowed if one parent is home unemployed or studying by correspondence.

If you have child care for a child over age 11 with a disability, include a letter from your doctor ONLY if you have not already sent one, verifying that the child needs daily care.

**Married/Common-Law Students**

**Spouse's Personal Data**

If your spouse is a Full-Time Student applying for assistance from Nova Scotia, your files will be cross referenced. You do not need to send duplicate information.

If your spouse is unemployed, attach a letter explaining the situation. If he or she is a seasonal worker or is temporarily laid off, state when he or she is expected to return to work. If your spouse is unable to work, please explain (for example, ill or home looking after children under 11 years of age).

**SCHEDULE B—Parents' Information** (Parents of dependent students must complete this schedule.)

**Parents' Financial Information**

**Marital Status:** See page 5 for more information about marital status and which parent you must provide information for if your parents are separated/divorced. If this is your first application for a student loan, you do not need to send the following documents. If you applied before AND your parents' marital status has changed since your last application *send a copy of the document listed below.*

Married                       Separated/Divorced                       Widowed                       Common-law                       Single  
 If remarried, state date of marriage: \_\_\_\_\_ *Include a copy of their separation/divorce agreement.*                      *Include a copy of the death certificate.*                      State date common-law status began: \_\_\_\_\_  
 (DD/MM/YYYY)

	Name	Employer	Estimated 2008 gross income (If reduced, see note on page 5)
Parent 1			
Parent 2			

**Parents' Tax Information** (Parents MUST complete this section or attach a copy of their 2007 income tax returns. Provide the amounts from the following line numbers on your parents' 2007 income tax returns.)

**PARENT 1**

101	<input type="text"/>	Income	207	<input type="text"/>	Reg Pension
113	<input type="text"/>	Old Age	208	<input type="text"/>	RRSP Contrib
114	<input type="text"/>	CPP	210	<input type="text"/>	Ded Elected Split-Pension
115	<input type="text"/>	Other Pension	214	<input type="text"/>	Child Care
116	<input type="text"/>	Elected Split-Pension	220	<input type="text"/>	Allowable Ded
119	<input type="text"/>	EI			
120	<input type="text"/>	Dividends	229	<input type="text"/>	Emp Expense
121	<input type="text"/>	Interest	236	<input type="text"/>	Net Income
126	<input type="text"/>	Rental	301	<input type="text"/>	Age Amount
127	<input type="text"/>	Capital Gains	303	<input type="text"/>	Spouse
128	<input type="text"/>	Sup Taxable Amt	305	<input type="text"/>	Equiv to Spouse
156	<input type="text"/>	Sup Pay Rec	308	<input type="text"/>	CPP
129	<input type="text"/>	RRSP	312	<input type="text"/>	EI
130	<input type="text"/>	Other Income	315	<input type="text"/>	Caregiver Amt
135	<input type="text"/>	Business Inc	318	<input type="text"/>	Disabled Depend
137	<input type="text"/>	Professional Inc	320	<input type="text"/>	Tuition
139	<input type="text"/>	Commission	324	<input type="text"/>	Tuition fr child
141/ 143	<input type="text"/>	Farming/ Fishing	330	<input type="text"/>	Medical
144	<input type="text"/>	Workers' Comp	435	<input type="text"/>	Inc Tax Paid
145	<input type="text"/>	Social Assist	448	<input type="text"/>	CPP Overpay
150	<input type="text"/>	Total Income	450	<input type="text"/>	EI Overpay

Do you have income you are not required to report on your income tax return (child support, pension etc.)?  Yes  No

If yes, please state the amount for 2007: \$ \_\_\_\_\_

Estimate the amount for 2008: \$ \_\_\_\_\_

What is the source of the income? \_\_\_\_\_

Are you paying child support?  Yes  No

If yes, please state the amount for 2007: \$ \_\_\_\_\_

Estimate the amount for 2008: \$ \_\_\_\_\_

**PARENT 2**

101	<input type="text"/>	Income	207	<input type="text"/>	Reg Pension
113	<input type="text"/>	Old Age	208	<input type="text"/>	RRSP Contrib
114	<input type="text"/>	CPP	210	<input type="text"/>	Ded Elected Split-Pension
115	<input type="text"/>	Other Pension	214	<input type="text"/>	Child Care
116	<input type="text"/>	Elected Split-Pension	220	<input type="text"/>	Allowable Ded
119	<input type="text"/>	EI			
120	<input type="text"/>	Dividends	229	<input type="text"/>	Emp Expense
121	<input type="text"/>	Interest	236	<input type="text"/>	Net Income
126	<input type="text"/>	Rental	301	<input type="text"/>	Age Amount
127	<input type="text"/>	Capital Gains	303	<input type="text"/>	Spouse
128	<input type="text"/>	Sup Taxable Amt	305	<input type="text"/>	Equiv to Spouse
156	<input type="text"/>	Sup Pay Rec	308	<input type="text"/>	CPP
129	<input type="text"/>	RRSP	312	<input type="text"/>	EI
130	<input type="text"/>	Other Income	315	<input type="text"/>	Caregiver Amt
135	<input type="text"/>	Business Inc	318	<input type="text"/>	Disabled Depend
137	<input type="text"/>	Professional Inc	320	<input type="text"/>	Tuition
139	<input type="text"/>	Commission	324	<input type="text"/>	Tuition fr child
141/ 143	<input type="text"/>	Farming/ Fishing	330	<input type="text"/>	Medical
144	<input type="text"/>	Workers' Comp	435	<input type="text"/>	Inc Tax Paid
145	<input type="text"/>	Social Assist	448	<input type="text"/>	CPP Overpay
150	<input type="text"/>	Total Income	450	<input type="text"/>	EI Overpay

Do you have income you are not required to report on your income tax return (child support, pension etc.)?  Yes  No

If yes, please state the amount for 2007: \$ \_\_\_\_\_

Estimate the amount for 2008: \$ \_\_\_\_\_

What is the source of the income? \_\_\_\_\_

Are you paying child support?  Yes  No

If yes, please state the amount for 2007: \$ \_\_\_\_\_

Estimate the amount for 2008: \$ \_\_\_\_\_

**SCHEDULE C—Spouse Information**

**The Following Section to be Completed by Married/Common-Law Students**

**Spouse's Personal Data**

Last name \_\_\_\_\_ First name(s) \_\_\_\_\_ Social Insurance Number \_\_\_\_\_

**Occupation:**

- Full-Time Student applying for aid (if yes, indicate to which province): \_\_\_\_\_
- Full-Time Student **not** applying for aid
- Unemployed, select reason below:  Employed
- home with children  collecting EI
- disabled  other (if other, explain on a separate sheet)
- illness

**If spouse is a Full-Time Student:**

Name of institution attending in 2008–2009 \_\_\_\_\_ Name of degree/diploma/certificate \_\_\_\_\_

Year of program \_\_\_\_\_ Start (DD/MM/YYYY) \_\_\_\_\_ End (DD/MM/YYYY) \_\_\_\_\_

**Spouse's Employment History** (List spouse's employment history for the past 48 months. Attach a separate sheet if you need more space. Include periods of employment and unemployment.)

Start Date Month Year	End Date Month Year	Part or Full Time (circle)	Name of employer (or state unemployed)	Province (Country)	Total income before deductions
		Part Full			
		Part Full			
		Part Full			
		Part Full			

**Spouse's Income**

Spouse's Investments \$ \_\_\_\_\_ (Claim the total value of savings, GICs, bonds, term deposits, shares, stocks, etc.)

Spouse's RRSP \$ \_\_\_\_\_ (Claim the total amount of spouse's RRSPs)

Are you requesting the exemption?  Yes  No (See note regarding exemption under Study Period Income on page A-4.)

If yes, how many years have you been out of school and in the work force (not a Full-Time Student)? \_\_\_\_\_

**Report your spouse's total gross income during YOUR pre-study and study period** (Documents are not required. All files are subject to audit.)

	Pre-study period	Study period		Pre-study period	Study period
<b>Employment income</b> (before deductions):	\$ _____	\$ _____	<b>Canada Pension Benefits:</b>	\$ _____	\$ _____
<b>Scholarships/awards:</b>	\$ _____	\$ _____	<b>Pension:</b>	\$ _____	\$ _____
<b>Employment Insurance Benefits (EI):</b>	\$ _____	\$ _____	Name source: _____		
<b>Social Assistance</b> (Provincial Employment Support/Income Assistance):	\$ _____	\$ _____	<b>Other income:</b>	\$ _____	\$ _____
			Name source: _____		

**Spouse's Tax Information** (You must list the amounts from the following line numbers of your spouse's 2007 income tax return.)

101	Income	120	Dividends	129	RRSP	208	RRSP Contribution
104	Other Emp Income	121	Interest	130	Other Income	210	Ded Elected Split-Pension
114	CPP	126	Rental	Specify source of line 130: _____		220	Allowable Deductions
115	Other Pension	127	Capital Gains	144	Workers' Comp	230	Sup Payments Made
116	Elected Split-Pension	128	Sup Taxable Amt	145	Social Assist	303	Spouse
119	EI	156	Sup Payments Rec	150	Total Income	305	Equiv. to Spouse

# Terms and Conditions–Nova Scotia Student Loan Agreement

## Definitions

“**Amortization Period**” means the period of time over which the loan principal and interest will be paid in full.

“**Arrears**” means the amount, expressed in dollars and/or days, of a loan payment, that is past due commencing on the first day after a scheduled payment is missed.

“**Authorized Agent**” means the agent authorized from time to time by the Province to administer the disbursement and repayment of Nova Scotia student assistance.

“**Default**” means failing to make the loan payment for more than 270 days.

“**Delinquent**” means failing to make the loan payment on the day it is due.

“**Explanation of Assessment**” means the document sent to a borrower for the purpose of notifying the borrower of his or her most recent needs assessment results.

“**Full-Time Student**” means a student enrolled in and attending at least 60% of a full post-secondary course load, or a person with a permanent disability who is recognized by the Province and is enrolled in and attending at least 40% of a full post-secondary course load.

“**Interest-Free Status**” means a status where no interest is accumulating and no payments are required from the borrower on their Nova Scotia Student Loan.

“**Minister**” means the Minister responsible for administering the Nova Scotia student loan program.

“**NSSAO**” means the Nova Scotia Student Assistance Office.

“**NSSL**” means a Nova Scotia student loan.

“**Prime Rate**” means the variable reference rate of interest as calculated by the Minister upon the variable reference rate of interest declared by the five largest Canadian financial institutions or their successors as their rate for Canadian dollar consumer loans. The Prime Rate will be calculated by ignoring both the highest and the lowest of those five rates and taking the average of the remaining three rates.

“**Province**” means Her Majesty the Queen in right of the Province of Nova Scotia.

## Acknowledgments

1. I acknowledge:
  - disbursement and repayment under the NSSL program is administered on behalf of the Province by its Authorized Agent;
  - my NSSL is for the purpose of providing necessary funding for the costs of my education and maintenance while I am a Full-Time Student;
  - any change in my financial situation or family status or status as a Full-Time Student may affect my entitlement to NSSL funds and make me subject to reassessment for which I will receive a revised Explanation of Assessment from the NSSAO;
  - interest on my NSSL shall not accrue while I am a Full-Time Student or within the six months after I cease to be a Full-Time Student;
  - I will not be entitled to receive more than the lifetime maximum number of weeks of student assistance, as may be determined from time to time by the Province, including loans or Interest-Free Status;
  - the Province or its Authorized Agent will send a letter within six months of my ceasing to be a Full-Time Student outlining how much I owe, the Amortization Period, the interest rate, the monthly payment amount, and the payment due date;
  - the Authorized Agent will determine the amount of my monthly payments based on my choice of interest rate and the Amortization Period. The monthly payments as determined by the Authorized Agent will be based on the interest option applied and the Amortization Period determined by the Authorized Agent;
  - I will not receive notice of a change in the Prime Rate.

## Repayment

2. I will repay my NSSL, including interest and principal, beginning on the first day of the seventh month after I cease to be a Full-Time Student unless otherwise agreed to by the Province.
3. At the time I am required to start making my loan payments under bullet 2 (above), I will pay the interest rate that is, at my option, either the Prime Rate plus 0.5% per year or the Prime Rate that is fixed at the day that I make my choice plus 3% per year.
4. If I do not make my choice of interest rate under bullet 3 (above), I will pay the interest rate of Prime Rate plus 0.5%.

5. Loan payments will be applied first to any unpaid non-sufficient funds charges, secondly to interest (including overdue interest) and then to principal. If I choose a fluctuating Prime Rate that may rise during the Amortization Period, then the amount of principal repaid by each payment will be reduced. All outstanding principal and interest (if any) will become due and payable on the last day of the Amortization Period.
6. The Authorized Agent will periodically review my loan account to ensure monthly loan payments are sufficient to repay my loan in a timely manner. If the Authorized Agent determines that my monthly loan payments will be insufficient to repay all outstanding loan principal by the last day of the Amortization Period, it will notify me by mail to the last address the Authorized Agent has recorded on my file of an increase in my monthly loan payment that is sufficient, in the Authorized Agent's opinion, to enable repayment in a timely manner.
7. I have the right to pay at any time, without notice, penalty or bonus, all or any part of the principal amount of the loan outstanding and any interest accrued.
8. If I return to being a Full-Time Student at any time after entering into consolidation, I may apply for and receive further NSSL provided that I have not exceeded the maximum number of weeks of assistance and that my loan is not in Arrears of payment.

### **Delinquency**

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9. I will be considered to be Delinquent if my monthly loan payment has not been received by the Authorized Agent and I have not demonstrated that I have resumed full-time studies as a Full-Time Student or the Province has determined that I am not a Full-Time Student.
10. If I am Delinquent, I may not be eligible to receive further student assistance from the Province, and my credit rating may be adversely affected.
11. If I am in Default, the total outstanding balance of my NSSL shall become immediately due and payable, and the Province or its Authorized Agent may take legal action against me at their discretion.

### **Obligation to Inform**

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12. I will notify the Authorized Agent immediately of any change in my name, address, banking information or status as a Full-Time Student.
13. I will notify the NSSAO immediately of any change in my name, address, family status, status as a Full-Time Student or any other change to information in my student loan application.
14. If I am in repayment and return to being a Full-Time Student, I must complete and submit a "Schedule 2 - Confirmation of Enrolment Form" (available from post-secondary institutions) to the Authorized Agent in order to keep my NSSL in Interest-Free Status.
15. The Province may change the provisions of this Agreement from time to time and will send written notice to me of any change in the Agreement by mail to the last address the Authorized Agent has recorded on my file. When I receive a notice of change I may repay all amounts owed within 14 days if I wish to end this Agreement. If I do not repay all amounts owed, the change will be deemed to have been accepted by me.

### **Authorization**

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16. I direct the Authorized Agent to debit my bank account each month on the loan payment due date, for the loan payment amount as determined by the Authorized Agent. The bank account will be the bank account to which my NSSL was disbursed or for which I provide details to the Authorized Agent. The Authorized Agent will apply all payments directly to my NSSL.
17. Should my financial institution dishonor any payment on my loan due to non-sufficient funds in my account, I will pay to the Province any charges applied by the financial institution.

### **Miscellaneous**

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18. Each of the provisions contained in this agreement is distinct and severable and a declaration of invalidity, illegality, or unenforceability of any such provision, or part thereof, by a court of competent jurisdiction shall not affect the validity or enforceability of any other provision of this agreement.
19. A waiver by the Province of any breach of a term or condition of this agreement shall not bind the party giving it unless it is in writing. A waiver, which is binding, shall not affect the rights of the party giving it with respect to any other breach.
20. Time is of the essence of this agreement.
21. All completed forms, which formed the basis of my application for NSSL, shall form part of this agreement.
22. This agreement contains the entire agreement concerning the subject matter of this agreement and no other understanding or agreements, verbal or otherwise, exist between the parties.
23. This agreement may not be assigned by me.