

REPAYMENT ASSISTANCE APPLICATION

PROTECTED WHEN COMPLETED

IMPORTANT - Read the instructions overleaf before completing. Please type or print in block letters. All areas must be completed or your application will be returned.

SECTION 1 - APPLICANT INFORMATION: TO BE COMPLETED BY YOU			
Last Name	First Name	Initials	
Date of birth (YYYY/MM/DD)	Social Insurance Number (S.I.N.)	Do you reside in Canada? (See Note 1) <input type="checkbox"/> No <input type="checkbox"/> Yes	
Mailing address (street number and name)			Apt. No.
City	Province	Postal Code	Primary Telephone Number
Email address			Secondary Telephone Number
Marital Status: <input type="checkbox"/> Married/Common Law <input type="checkbox"/> Single (See Note 2)		Are you currently enrolled in studies at a postsecondary institution that participates in the Canada Student Loans Program? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Family Size (See Note 3)		If yes, Full-Time and/or Part-Time. <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	
Are you permanently disabled? (See Note 4) <input type="checkbox"/> No <input type="checkbox"/> Yes		Indicate your most recent Period of Study End Date (YYYY/MM/DD): Part-Time (if applicable) _____	
Provide your Banking Information for the purpose of monthly withdrawal and attach a Void Cheque.			
Name of Financial Institution: _____		If you provide an account that belongs to another individual, you must provide the following authorization:	
Transit Number: _____ Bank ID: _____		Bank Account Holder Name: _____	
Account Number: _____		Bank Account Holder Signature: _____	
Provide details of any Federal (Full-Time or Part-Time) or Provincial Student Loans:			
Financial Institution(s) and/or Service Provider	Federally Issued and/or Province of Issue	Current Balance	Monthly Payment
(1) _____	(1) _____	(1) \$ _____	(1) \$ _____
(2) _____	(2) _____	(2) \$ _____	(2) \$ _____
(3) _____	(3) _____	(3) \$ _____	(3) \$ _____
(4) _____	(4) _____	(4) \$ _____	(4) \$ _____
SECTION 2 - STATEMENT OF INCOME: TO BE COMPLETED BY YOU			
FAMILY INCOME	GROSS MONTHLY FAMILY INCOME PRIOR TO DEDUCTIONS		
	Column 1	Column 2	Column 3
Source	Month application is dated	Month before month in Column 1	Month before month in Column 2
Your Gross Income (before taxes and deductions) (See Note 5)	\$ _____	\$ _____	\$ _____
Spouse/Partner's gross income (if applicable)	\$ _____	\$ _____	\$ _____
Other income (See Note 6)	\$ _____	\$ _____	\$ _____
Total Gross Family income (See Note 7)	\$ _____	\$ _____	\$ _____
If you indicated \$0 as your total gross family income for any month, attach a personal statement to explain how you are meeting your living expenses.			
APPLICANT'S CERTIFICATION AND CONSENT			
I certify that all information I have provided is complete and true. I authorize the federal government, the provincial/territorial government(s) (in the case of NL, also including the Student Loan Corporation of NL and its agents), the NSLSC, consumer credit grantor(s), credit bureau(s), credit reporting agency(ies), any person or business with whom I have or may have had financial dealings and my Financial Institution(s) to directly or indirectly collect, retain, use and exchange among themselves any personal information related to this application for the purposes of carrying out their duties under the Federal Act(s) and Regulation(s) and/or the applicable Provincial Act(s) and Regulation(s) relating to student financial assistance including for administration, enforcement, debt collection, audit, verification, research and evaluation purposes. If I entered into any agreements under the Canada Student Loans Act (CSLA) or the Canada Student Financial Assistance Act (CSFAA), or associated provincial loan programs, or signed any promissory notes while I was a minor, I hereby ratify those agreements and notes. I authorize the federal government and the provincial/territorial government(s) (in the case of NL, also including the Student Loan Corporation of NL and its agents) to verify income reported on this application, and any prior applications for repayment assistance, with the Canada Revenue Agency.			
I recognize that I may be required to provide additional supporting documentation as proof of all income reported in section 2 in order to determine eligibility for the Repayment Assistance Plan. Furthermore, I hereby authorize the Minister to initiate monthly withdrawals from the Financial Institution account indicated on this application. (See Note 8)			
Applicant's Signature _____		Application Date (YYYY/MM/DD) _____	
SECTION 3 - SPOUSE/PARTNER INFORMATION: TO BE COMPLETED BY YOUR SPOUSE/PARTNER (if applicable)			
Is your spouse/partner repaying Canada Student Loans (full-time or part-time) and/or Provincial Student Loans?		<input type="checkbox"/> No <input type="checkbox"/> Yes	
		If yes, total monthly payment. \$ _____	
Total outstanding balance of all Federal and Provincial student loans held by spouse/partner in repayment?			\$ _____
SPOUSE / PARTNER CERTIFICATION AND CONSENT			
I certify that the spousal income (my income) reported section 2 and all information I have provided in section 3 is complete and true. I authorize the federal government, the provincial/territorial government(s) (in the case of NL, also including the Student Loan Corporation of NL and its agents), the NSLSC, consumer credit grantor(s), credit bureau(s), credit reporting agency(ies), any person or business with whom I have or may have had financial dealings and my Financial Institution(s) to directly or indirectly collect, retain, use and exchange among themselves any personal information related to this application for the purposes of carrying out their duties under the Federal Act(s) and Regulation(s) and/or the applicable Provincial Act(s) and Regulation(s) relating to student financial assistance including for administration, enforcement, debt collection, audit, verification, research and evaluation purposes. I authorize the federal government and the provincial/territorial government(s) to verify income reported on this application, and any prior applications for repayment assistance, with the Canada Revenue Agency.			
Spouse/Partner's Name (please print) _____		Spouse/Partner's Signature _____	
Date (YYYY/MM/DD) _____		Spouse/Partner's S.I.N. _____	

REPAYMENT ASSISTANCE

BASIC INFORMATION

The Federal Act(s) and Regulation(s) and/or the Provincial Act(s) and Regulation(s) applicable set forth the legal rights and obligations of a borrower and should be referred to in the case of uncertainty or dispute.

Your application must be received by the National Student Loans Service Centre or your Financial Institution within 40 days of your signature date. Furthermore, the National Student Loans Service Centre or your Financial Institution will send a letter to you indicating the result of your application.

If you are part of an Integrated Province (Ontario, Saskatchewan, New Brunswick, Newfoundland and Labrador) this application will cover the following types of repayment assistance: Interest Relief and Debt Reduction in Repayment (provincial) and the Repayment Assistance Plan (federal/provincial).

If you would like to discuss this application, please contact the National Student Loans Service Centre and/or your Financial Institution.

National Student Loans Service Centre
Toll Free: 1 888 815-4514 (within North America)
800 2 225-2501 (outside North America)
TTY: 1 888 815-4556

ELIGIBILITY OVERVIEW

1. You must have consolidated your loan(s) and entered into a Consolidation Agreement for your Integrated Student Loans, Canada Student Loans, and/or Provincial Student Loans, as applicable. If you have not entered into a Consolidation Agreement, contact the National Student Loans Service Centre and/or your Financial Institution, as applicable.
2. To be eligible for assistance, you must not have been previously revoked or terminated from the program, made false or misleading statements or have failed to disclose information as requested.
3. You may be ineligible for assistance if you are currently restricted from eligibility for student loans from the Government of Canada and/or the province/territory from which your student loans were issued.
4. You will be informed by the National Student Loans Service Centre and/or your Financial Institution if you are required to provide actual Proof of Income with your Repayment Assistance Application. In this case, Proof of Income must be provided in order to determine your eligibility for the Repayment Assistance Plan.
5. If you have outstanding interest that you have not paid, you can choose to add it to your principal balance (capitalize) if you have not previously used this option. Only three months of interest can be added to your principal. Should you choose to capitalize any unpaid interest, you must enter into a new Consolidation Agreement, as applicable.

NOTES

1. You must reside in Canada to be eligible for the program. For the purposes of this application, an individual who is participating in an international internship program or is a member of the Canadian Armed Forces who is stationed abroad is considered to be residing in Canada.
2. **Single** includes the following: separated, widowed, divorced, single parent and not living common law.
3. Identify the number of people in your family residing with you permanently, including yourself, spouse/common law partner and dependants, as applicable. Dependants are children under 21 years of age and living with you or in full-time school attendance.
4. A functional limitation caused by a physical or mental impairment that restricts the ability of the person to perform the daily activities necessary to participate in studies in a post-secondary school or the labour force, and is expected to remain with the person for the person's expected life.
5. If you made child support payments or spousal support payments, deduct these amounts from your monthly gross income.
6. Examples of **Other Income**: employment, child and spousal support, alimony, separation/maintenance payments, monetary gifts, lottery winnings and government benefits (such as Employment Insurance, Worker's Compensation, family benefits/general welfare) cashed-in Registered Retirement Savings Plan (RRSP), cashed-in investments, pension income (such as Canada Pension Plan, Québec Pension Plan and superannuation), drawings and any other income (awards, scholarships, fellowships, bursaries and grants).
7. If you indicated \$0 as your total gross family income for any month, attach a personal statement to explain how you are meeting your living expenses.
8. If information on this application has been knowingly falsified, omitted, misrepresented, or is misleading, the applicant may be restricted from future student financial assistance for a period of 1-5 years.
9. **Periods of Assistance** - Interest Relief is available for periods of 6 months up to a maximum of 30 months at any point during the repayment of your loan. Additional periods of Interest Relief may be available to you if you meet the eligibility criteria. The Repayment Assistance Plan (RAP) is available for periods of 6 months up to a maximum of 120 months at any point during the repayment of your loan.
10. **Re-Application** - an application is required every six months.
11. If your application is refused you will be responsible for making loan principal and interest payments in accordance with your Consolidation Agreement.
12. You are responsible for making loan principal and interest payments in accordance with your Consolidation Agreement when your period of assistance expires; however, you may re-apply for assistance (see 10.)
13. Federal Act - Canada Student Financial Assistance Act or Canada Student Loans Act
Federal Regulation - Canada Student Financial Assistance Regulations or Canada Student Loans Regulations.
Provincial Act - The Ministry of Training, Colleges and Universities Act (ON), The Student Assistance and Student Aid Fund Act, 1985 (SK), or the NL Student Financial Assistance Act (NL) or The Youth Assistance Act (NB).
Provincial Regulation - A Regulation made under a Provincial Act.

INSTRUCTIONS - REPAYMENT ASSISTANCE APPLICATION

To ensure that your Repayment Assistance Application is processed as quickly as possible, it is important that you fill it out completely and correctly, and provide all supporting documentation. Please use the checklist below to ensure you have covered all the steps.

SECTION 1 – APPLICANT INFORMATION

1. Enter your personal information.	<input type="checkbox"/>
2. Indicate if you are a Canadian resident. Members of the Canadian Armed Forces who are stationed abroad and applicants who are participating in an international internship program are considered to be Canadian residents. You must provide a letter from the employer/program that outlines the start and end dates of the term.	<input type="checkbox"/>
3. Indicate your family size. Identify the number of people in your family residing with you permanently, including yourself, spouse/common law partner and dependants, as applicable. If you are single, with no dependants, enter "1" for your family size.	<input type="checkbox"/>
4. Indicate if you are permanently disabled. This information is necessary if you wish to be assessed for the Repayment Assistance Plan for Persons with Permanent Disabilities.	<input type="checkbox"/>
5. Indicate the Financial Institution/Bank for withdrawal purposes. If the account belongs to another individual, be sure to indicate the Bank Account Holder Name and have the appropriate individual sign the application in the space provided; furthermore, you must provide a void cheque.	<input type="checkbox"/>

SECTION 2 – STATEMENT OF INCOME

6. Calculate your gross family income. Statement of gross family income, before taxes and deductions, such as employment earnings, investment earnings, payments received through social programs, support payment and monetary gifts must be declared for each type of income you and, if applicable, your spouse/partner received during the current and previous 2 months. If you are requested to provide proof of income, make sure you include photocopies of all required supporting documentation. Keep the originals for your files. If you are self-employed, a monthly bank statement, a letter from your Financial Institution, or a letter signed by an accountant is acceptable.	<input type="checkbox"/>
7. Submit zero income declaration letter. If you and, if applicable, your spouse/partner had no income for any of the months disclosed in the application, you must also attach a personal statement explaining how you live or lived on no income. The letter should include an estimated dollar amount of the monthly support you are receiving from parents, relatives or friends for your accommodation, food, transportation, etc.	<input type="checkbox"/>
8. Sign and date your completed application. Once you have completed the application form, remember to sign and date the application form. You may mail your application and copies of supporting document(s) to the National Student Loans Service Centre in the postage-paid envelope provided with your application or send it by fax. Mailing Address: National Student Loans Service Centre P.O. Box 4030 Mississauga ON L5A 4M4 Fax Number: 1-888-815-4657	<input type="checkbox"/>

SECTION 3 – SPOUSE/PARTNER INFORMATION (if applicable)

9. Provide proof of your spouse/partner's student loan payments. If your spouse or partner is repaying full-time or part-time Canada Student Loans and/or Provincial Student Loans, check "Yes." Enter the total monthly provincial and federal student loan payment amount for your spouse/partner in the space provided. Lastly, enter the provincial and/or territorial jurisdictions in which the loans are held.	<input type="checkbox"/>
10. Spouse/Partner must sign, date and provide his/her Social Insurance Number on the completed application.	<input type="checkbox"/>

NOTICE OF COLLECTION OF PERSONAL INFORMATION

The information you provide on this application form is collected under the authority of the Department of Human Resources and Skills Development Act, the Canada Student Financial Administration Act and the Canada Student Loan Act, to administer the Canada Student Loans Program (CSLP). The Social Insurance Number (SIN) is collected under the authority of the Human Resources and Skills Development Act and in accordance with Treasury Board's Policy on Privacy Protection regarding use of the SIN. The SIN will be used as a file identifier and, along with the other information you provide, will also be used to validate your application, and to administer and enforce the CSL program. You must provide your SIN and the other personal information requested on this form to be considered for the CSL program.

The information collected on this form will be shared with provincial governments, financial institutions and the National Student Loans Service Centre. It could also be shared with other federal government institutions, appropriate authority, educational institution and any previous lender for the purpose of the administration and enforcement of the CSFAA or the CSLA.

Administration and enforcement of the CSL program means development and operation of the program, including investigations into allegations of wrongdoing, audits, and policy analysis, research and/or evaluation. These activities may involve the matching of various sources of data that are under the control of the Government of Canada.

NOTICE OF COLLECTION OF PERSONAL INFORMATION (relevant to borrowers with ON student loans)

The personal information provided in connection with this application, including your Social Insurance Number ("SIN"), is necessary for the proper administration of the Ontario Student Assistance Program ("OSAP"). This information is being collected and will be used by the Ministry of Training, Colleges and Universities ("the ministry") to administer and enforce OSAP including: determining eligibility; verifying the application and any Interest Relief granted; maintaining and auditing the applicant's file; and collecting loans, overpayments, and repayments. Your SIN will be used as a general identifier in administering OSAP. The ministry administers and enforces OSAP under the authority of the Ministry of Training, Colleges and Universities Act, R.S.O. 1990, c. M.19, as amended, and R.R.O. 1990, Reg. 773, Reg. 774 and Reg. 775, as amended, and O. Reg. 268/01, as amended; the Financial Administration Act, R.S.O.1990, c. F.12, as amended; the Canada Student Financial Assistance Act, S.C. 1994, c.28, as amended; and, the Canada Student Financial Assistance regulations, SOR 95-329. If you have any questions about the collection or use of this information, contact the Director, Student Support Branch, Ministry of Training, Colleges and Universities, PO Box 4500, 189 Red River Road, 4th Floor, Thunder Bay ON P7B 6G9.