Student Financial Assistance for Full-Time Study Application Checklist



This document provides a checklist of the information required to complete your online or paper application.

STUDENT INFORMATION:			DEPENDENT STUDENTS WILL ALSO		
	Social Insurance Number (SIN)	<u>RE</u>	<u>UIRE:</u>		
	Email address (where information can be sent to you on a regular basis)	No un		ou are a dependent student	
	Mailing address (where you want to receive notices and letters)		you have b years, or	een out of high school four	
	Permanent address (if different from mailing address)		least two p	een in the workforce for at eriods of 12 months, or	
	Employment history (if applicable)			arried or living common-law, or single parent	
AC	ADEMIC INFORMATION:				
	Name of Program of Study		ate of birth of bling(s)	f your parent(s) and any	
	Program start and end dates (year/month/day)		, ,	rent(s) and any sibling(s) t-secondary studies	
	Percentage of full-time course load (contact your school if you don't know what it is)		•	umber amounts from your ous year's Income Tax Return	
	Educational institution name and phone number	MA	•	MMON-LAW STUDENTS	
	Educational history (if applicable)		ALSO REQ		
RE	SOURCES:			of birth of your partner and any ed in post-secondary studies	
	Income from your previous year's Income Tax Return (line 15000 and 21000 – if applicable)		artner's total	income from previous year d 21000 of their previous year's	
	Scholarships, bursaries and other education-targeted funding		ncome Tax Re		
PERMANENT RESIDENTS AND PROTECTED		SINGLE PARENT STUDENTS WILL ALSO REQUIRE:			
	RSONS OF CANADA WILL ALSO QUIRE:		IN of any chil	dren enrolled in post- dies	
	The date (year/month/day) you arrived in				
	Canada and in New Brunswick			elp in determining your ory, please call Student vices.	

Please refer to the Information Guide at <u>studentaid.gnb.ca</u> for more information.

If you have any questions, please call Student Financial Services for assistance.

