

KING'S UNIVERSITY COLLEGE WORK STUDY APPLICATION

FOR REGISTERED KING'S UNIVERSITY COLLEGE STUDENTS ONLY

RETURN TO: King's University College, Student Financial Services, 266 Epworth Avenue, London ON N6A 2M3

IMPORTANT:

You must complete all sections of this application and attach the required documentation or your application will be refused.

PERSONAL DATA

Surname	First Name
Student Number	Email Address

Local Mailing Address	City
Postal Code	Telephone Number

Permanent Home Address	City
Postal Code	Telephone Number

Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Citizenship <input type="checkbox"/> Canadian <input type="checkbox"/> Other (specify) _____	Home Province <input type="checkbox"/> Ontario <input type="checkbox"/> Other Prov/Country (specify)

REGISTRATION INFORMATION

Year of Study: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Previous Years Average: _____ % Are you on academic probation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course Load in %: (Must be registered in 60% to be eligible, 40% if disabled).
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Please note: King's University College will be checking academic progress for purposes of assessing this application.

REASON FOR REQUEST

<input type="checkbox"/> My OSAP award is not sufficient to cover my expenses.	<input type="checkbox"/> Other (specify) _____
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A letter must accompany this application which provides an explanation detailing your individual reasons for requesting financial assistance. Applicable parental or spousal information (ie., occupation, annual income, etc.) must be included.

STUDENT BUDGET (Page 2)

To be completed by all applicants for this current study period.
(If married, or sole support parent, complete budget with all family expenses and resources.)



Financial Information Form:

Name: _____ Student Number: _____

I am married, in a common law relationship and/or have a child. Please complete the form including all family expenses and resources.

I am a single student with no children. Please complete the form using your personal expenses and resources only.

When completing the financial information form, please provide the costs incurred for the academic year (i.e. 8 months). Please ensure that you complete this section accurately. Applications that are incomplete and/or those that do not fully disclose resources will be denied.

Expenses for Current Academic Year (monthly costs x 8)

Housing	\$	<input type="text"/>	Personal Expenses	\$	<input type="text"/>
Food	\$	<input type="text"/>	Other (please specify below)	\$	<input type="text"/>
Utilities (heat, hydro, cable, internet, etc.)	\$	<input type="text"/>	_____		
Phone	\$	<input type="text"/>	Other (please specify below)	\$	<input type="text"/>

Total Resources for Current Academic Year

Previous Savings or Expected Savings as of September 5th	\$	<input type="text"/>	King's Scholarships/Awards	\$	<input type="text"/>
Parental/Family Contribution and RESP withdrawal	\$	<input type="text"/>	External Scholarships/Awards	\$	<input type="text"/>
Spousal Income	\$	<input type="text"/>	Other (please specify below)	\$	<input type="text"/>
Study Period Income	\$	<input type="text"/>	_____		

Do you have a line of credit? If yes, please include a statement.

Additional information regarding any exceptional expenses/situations not reflected above:

We do ask that all domestic students applying for bursaries also complete an OSAP application, if they have not done so already. If you are not applying for OSAP, please specify why.

PRIVACY OF INFORMATION

ALL student information collected and recorded by the King's University College at the University of Western Ontario is considered **CONFIDENTIAL** and will be released only to the student concerned or to University staff for use in the course of their duties, or with written consent of the student as outlined in the UWO Guidelines on Access to Information and Protection of Privacy Policy and the Official Student Record Information Privacy Policy. Such authorization will be considered in effect until the student cancels the authorization.

DECLARATION

I have read and agree to the following:

- 1) The information provided on this application is complete and accurate and I require additional funds to pursue my studies at the King's University College at the University of Western Ontario.
- 2) I consent to the use of personal information provided on this application or accompanying documentation, including my social insurance number, for the purpose of determining my eligibility for financial assistance.
- 3) All information provided in connection with this application is subject to audit and verification by King's University College at the University of Western Ontario. I consent to the disclosure of information on this application to the Ministry of Training, Colleges and Universities and any other source when necessary for audit and verification of the information provided. Documentation may be requested at a later date based on an audit.
- 4) If any information is found to be untrue, I agree to pay back any funds I have received as a result of the application.
- 5) The value of any bursary or award I receive will be applied to my student account.
- 6) The decision on my application for financial assistance and the amount of funding awarded, if applicable, will be communicated to me in writing or via my UWO e-mail account.
- 7) I consent to the disclosure of my name, address, biographical data, faculty, academic programs, any other personal information that confirms criteria to the donor of my bursary or award to be used in any publication associated with bursary/award.
- 8) I understand that if any information is found to be untrue, this application may be considered cancelled. I have no objection to College/University sources being contacted for corroborating information. **I will advise your office in writing of any course load changes, as it may affect my eligibility.**

Signature _____ Date _____