



## Required Documents

- Fees Assessment. This can be found on Bear Tracks under the Financials section. Please ensure the numbers are not cut-off. You can also ask for one at the Student Connect (First floor of the Admin. Building). They are free of charge, just bring your ONEcard.
- Spring/Summer Fee Assessment. Please bring in a copy of this document ONLY if you have taken Spring/Summer courses in the year that you are applying for the Access Fund.
- Student Loan Notice of Assessment. If you are ineligible for loans please read the section on letters below.
   Canadian students who are ineligible are required to bring in a copy of the Notice of Assessment for the current year that states they are ineligible.
- Bank Statements. We require bank statements for the three previous months for all accounts under the applicant's name.
- Pay Stubs. It is necessary for each applicant to bring in May, June, July and August pays stubs from the summer (If your pay cheque is received through direct deposit and is visibly present on your bank statements, the pay stubs are not required).
- Completed Access Fund Application Form. All sections up to and including, Section 6: Financial Information and the budget table.
- Study Permits and proof of funds documentation: (For international students only) Applicants must provide a copy of their study permits and proof of funds documents that were given to the government of Canada detailing your financial plan when entering the country.

### Documentation for consideration of EXCEPTIONAL EXPENSES

- Credit card or Line of Credit statements from the previous 3 months. If asking to cover minimum
  payments or interest payments, statements must be provided with proof that the expenses were for educational
  expenses.
- Higher accommodation costs. Tenancy agreement/receipts/utility bills must be provided. Applicants are expected to live with a roommate where possible (mature, married and students with dependents are exempt).
- Medical/Dental/Optical. Receipts or official documentation must be provided. Please note that if you have opted out of the Students' Union Health & Dental Plan these costs will not be considered.
- Documentation for any exceptional expenses you wish to have considered. ie: cell phone, internet, daycare costs.

### Letters for consideration of EXCEPTIONAL CIRCUMSTANCES

- o International students. Please explain why your original financial plan is no longer sufficient.
- o Defaulting on a student loan/Bankruptcy. Please explain the circumstances of your default.
- Required Contribution. Students are expected to contribute \$1500 to their education if they are available to
  work during the Spring/Summer period. If you are unable to work please explain the reason why.
- Any other exceptional cases requesting more funding require a letter.





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| Name: | ID # |

# **Application Information**

Sections 1 through 6 (including the budget section) MUST be completed IN FULL BEFORE your appointment. You must bring all applicable supporting documentation mentioned on page 1 to your appointment.

| SECTION 1: PERSONAL INFORMATION                                     |                                 |                                 |  |  |
|---------------------------------------------------------------------|---------------------------------|---------------------------------|--|--|
| Student ID #  Have you applied for an Access Fund Bursary in the pa |                                 | es, in year                     |  |  |
| How did you hear about the Access Fund?                             |                                 |                                 |  |  |
|                                                                     |                                 |                                 |  |  |
| First Name                                                          | Last Name _                     |                                 |  |  |
| Address                                                             | City/Province                   |                                 |  |  |
| Postal Code                                                         | Phone Number _<br>Email Address |                                 |  |  |
| SIN                                                                 | (U of A account)                | @ualberta.ca                    |  |  |
| Residency Status:                                                   | Student Authorization           | ☐ Landed Immigrant              |  |  |
| If you are an international student what country are you            | from?                           |                                 |  |  |
| If you are an international student and went to high sch            | nool in Canada, what wa         | as the name of your highschool? |  |  |
| Marital Status: Single Married                                      | ☐ Common-law                    | ☐ Divorced/ Separated           |  |  |
| Number of Dependents (under 18) Do you Ages of                      | our parents live in the E       | dmonton Area?                   |  |  |
| dependents Wher                                                     | n did you graduate High         | School?                         |  |  |
| SECTION 2: EMPLOYMENT INFORMA                                       | ATION                           |                                 |  |  |
| Place of employment: September 2013 to Present                      |                                 | Hours per week:                 |  |  |
| September 2013 to Fresent                                           | N                               | Nonthly earnings:               |  |  |
| Place of employment:                                                |                                 | Hours per week:                 |  |  |
| May 2013- August 2013                                               | N                               | Monthly earnings:               |  |  |
| Place of employment:                                                |                                 | Hours per week:                 |  |  |
| January 2013-April 2013                                             | N                               | lonthly earnings:               |  |  |





Winter 2014 Application
Name: \_\_\_\_\_ ID #\_\_\_\_\_

| SECTION 3: EDUCATION INFORMATION                                          |                    |                            |                      |  |
|---------------------------------------------------------------------------|--------------------|----------------------------|----------------------|--|
| Faculty:                                                                  |                    | Specific Progra            | am:                  |  |
| Current Year of Program:                                                  |                    |                            |                      |  |
| How many years of post-secondary educ                                     | ation have you cor | npleted?                   |                      |  |
| Are you completing an after degree?                                       | □ No [             | Yes                        |                      |  |
| If yes, please state first degree:                                        |                    |                            |                      |  |
| Overall GPA                                                               | Exp                | ected graduation date      | ? (MM/YY)            |  |
| Number of <b>c</b> redits currently enrolled in:                          | Fall 2013:         | Win                        | ter 2014:            |  |
| Were you enrolled in classes during either life Yes, how many credits     |                    | <del></del>                | o                    |  |
| SECTION 4: GOVERNMENT                                                     | Γ STUDENT I        | OAN INFORM                 | ATION                |  |
| Student Loans & Other Government Fun                                      | •                  |                            | \$<br>\$             |  |
| Which province do you receive funding fr                                  | rom?               |                            |                      |  |
| If you have <b>not</b> applied for a Governmen Loan, briefly explain why. | t Student          |                            |                      |  |
| If your funding was insufficient, did you a                               | ppeal?             | □ No □ Y€                  | es                   |  |
| SECTION 5: OTHER FUNDI                                                    | NG INFORM          | ATION                      |                      |  |
| Additional resources available to you for t                               | he current academi | c year:                    |                      |  |
| Scholarships, awards, bursaries                                           | es <sub>\$</sub>   | Line of Credit             | □ No □ Yes _\$       |  |
| Additional assets (GICs etc)                                              | es <u></u> \$      | Credit Cards               | □ No □ Yes <u>\$</u> |  |
| RRSPs No Ye                                                               | es<br>\$           | Emergency<br>Student Loans | □ No □ Yes \$        |  |





| Winter   | 2014 | Ann | lication |
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| Name: | ID#   |
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# **SECTION 6: FINANCIAL INFORMATION**

If you are a married/common-law/single parent student, figures should include all family members living with you. If both spouses are U of A students, you should be applying on separate applications but list shared expenses / resources.

### **BUDGET FOR Fall 2013/Winter 2014**

OOPs Notice of Assessment

Letter \_

Other

Credit Card/Line of Credit Card Statements

| Income (Monthly)                                 | Reported  | Allowable | Expenses (Monthly)                                     | Reported | Allowable |
|--------------------------------------------------|-----------|-----------|--------------------------------------------------------|----------|-----------|
| From parents/spouse:                             |           | 0         | Accommodation:                                         |          |           |
| Employment:                                      |           |           | (Rent/Mortgage, etc.) Utilities (includes power, heat, |          |           |
| Employment.                                      |           | F         | water & basic telephone):                              |          | F         |
| Band Funding:                                    |           | Е         | Food/Personal Care:                                    |          |           |
| Child Support /                                  |           |           | Clothing:                                              |          |           |
| Alimony:                                         |           |           | Child Care:                                            |          |           |
| Child Tax Credit:                                |           |           | Cell phone:                                            |          |           |
| Other (Specify):                                 |           |           | Credit Card(s)                                         |          | C         |
| Carior (Cpcciny).                                |           | E         | (min. payment):                                        |          | F         |
|                                                  |           |           | Transportation:                                        |          |           |
|                                                  |           |           | Other (Specify):                                       |          |           |
|                                                  |           | U         |                                                        |          | 11        |
|                                                  |           | C         |                                                        |          |           |
|                                                  |           | 5         |                                                        |          | S         |
| Total Monthly Income:                            |           | Е         | Total Monthly Expenses:                                |          |           |
|                                                  |           |           |                                                        |          |           |
| Monthly Income                                   |           |           | Monthly Expenses                                       |          |           |
| x 4 or 8 months<br>(A)                           |           |           | <b>x</b> <u>4 or 8 months</u> : (F)                    |          |           |
| Savings:                                         |           | 0         | Tuition and Fees:                                      |          | 0         |
| (B)                                              |           | N         | (G)                                                    |          |           |
| Government                                       |           | IN        | Books and Supplies:                                    |          | N N       |
| Funding(C)                                       |           |           | (H)                                                    |          |           |
| Scholarships and/or<br>Bursaries (D)             |           | V         | Medical/Dental/Optical                                 |          |           |
| Bursaries (D)                                    |           | <u> </u>  | (I)<br>Other (Specify) (J)                             |          | Y         |
|                                                  |           |           | Other (Specify) (3)                                    |          |           |
|                                                  |           |           |                                                        |          |           |
|                                                  |           |           |                                                        |          |           |
| Total Income for 4 or 8                          | Months:   |           | Total Expenses for 4 or 8 M                            | onths:   |           |
|                                                  | \$        |           |                                                        | \$       |           |
| (A + B + C + D):                                 | (E)       |           | (F + G + H + I + J):                                   | (K)      |           |
| SHORTFALL: Total Income (E) – Total Expenses (K) |           |           |                                                        |          |           |
|                                                  |           |           |                                                        |          |           |
| OFFICE USE ONLY:                                 | AFI:      |           | App Rating:                                            | A B G    | J K L     |
|                                                  | Interview |           | Date entered:                                          |          |           |
| Documents Requested:                             |           | Docs Rec  | eived Office Notes:                                    |          |           |

☐ Check on loan

Funds to Date:





| Winter | 2014 | App | lication |
|--------|------|-----|----------|
|--------|------|-----|----------|

| 1 1011101 | Name: |  | ID# |
|-----------|-------|--|-----|
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# --- STOP HERE --THE SECTION BELOW WILL BE COMPLETED AT YOUR INTERVIEW

| Statutory Declaration                                                                                                                                                                                                                                                                           |                                    |                                                                                                 |                                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------------|----------------------------------------|
| I                                                                                                                                                                                                                                                                                               | this                               | DECLARED BEFORE ME AT Edmonton, in the Province of Alberta day of                               | a<br>AD 2014                           |
| solemnly declare:                                                                                                                                                                                                                                                                               |                                    |                                                                                                 | _                                      |
| THAT all of the statments in the foregoing application for bursary are true, complete and accurate.                                                                                                                                                                                             |                                    | A Commissioner of Oaths                                                                         |                                        |
| And I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as made if under oath.                                                                                                                                           |                                    | in and for the Province of Alberta                                                              |                                        |
| Signature of Applicant                                                                                                                                                                                                                                                                          |                                    |                                                                                                 |                                        |
| Distribution of funds towards Emergency Stu                                                                                                                                                                                                                                                     | dent L                             | oans and tuition                                                                                |                                        |
| I understand that all or part or outstanding Emergency Student Loan that I currently ow and any outstanding tuition for the current or previous se documentation and reasoning to the appropriate Financia or not to use the Access Fund Bursary to repay outstand current or past semester(s). | ve to Un<br>mester(:<br>Il Aid Off | s). If I do not wish for this to happen, I mu<br>fice member and it will be at their discretion | ng (UBEF)<br>est provide<br>on whether |
| Do you understand and agree to this statem                                                                                                                                                                                                                                                      | ent?                               | ☐ No ☐ Yes                                                                                      |                                        |
| If I disagree, I understand that I must contact the Financia if I wish to discuss this.                                                                                                                                                                                                         | al Aid Of                          | ffice Staff member no later than                                                                |                                        |
| For Emergency Student Loans, please contact Shelley Ma<br>For outstanding tuition amounts, please contact Hailey Ma                                                                                                                                                                             |                                    |                                                                                                 |                                        |
| Signature:                                                                                                                                                                                                                                                                                      |                                    | Date:                                                                                           | <del></del>                            |
|                                                                                                                                                                                                                                                                                                 |                                    |                                                                                                 |                                        |
|                                                                                                                                                                                                                                                                                                 |                                    |                                                                                                 |                                        |

### It is a criminal offense to make a false declaration

**PLEASE NOTE:** After your interview, your relevant financial information goes to a Selection Committee who makes the decision regarding your bursary. Your identifying information is kept confidential.