

FINANCIAL AID APPLICATION UPDATE FORM - REQUIRED

All students who submitted a full-year financial aid application are required to submit this Financial Aid update form at the beginning of each subsequent term.

*****Failure to submit this update form will result in your application being withdrawn from consideration for the term for which an update was not submitted***

Please check one: ___ My income/expenses have not changed (please sign below)

___ My income and/or expenses have changed (note changes below)

TIME FRAME DURING WHICH THE CHANGES APPLY: _____

EXPENSES				INCOME	
___ Individual ___ Household				___ Individual ___ Household	
	\$ Per Month		\$ Per Term		\$ Per Term
Tuition & Fees		x1		Income	
Books and Supplies		x1		Savings (portion available for use)	
Rent/Mortgage Payment per month		x4		Family/Friends Contribution	
Insurance (life/auto/home) per month		x4		Child Support	
Telephone/internet per month		x4		Canada Child Benefit	
Heat/Utilities per month		x4		HST rebate	
Auto (gas/maintenance) per month		x4		Trust Funds/Investments/etc cashed	
Groceries per month		x4		Provincial Student Loan	
Clothing		x1		Canadian Federal Student Loan	
Laundry per month		x4		US Student Loan	
Personal items per month		x4		Scholarships/Awards/etc	
Loan/lease payments per month		x4		Bursaries/Grants (non VST)	
Recreation per month		x4		Social Assistance/Disability	
Restaurant meals per month		x4		Income Tax/HST Rebate	
Round trip home		x1		Bank Loan/Line of Credit	
Child care per month		x4		Denomination/congregation Support	
Income Tax Payable		x1		Other (specify)	
Other (Specify)		x1			
TOTAL COST			\$	TOTAL RESOURCES	\$
AMOUNT NEEDED: TOTAL EXPENSES MINUS TOTAL RESOURCES = \$					

Additional Information: If there is any additional information which would add to or clarify any details of your update, please make note of them below.

Declaration: I certify that this is accurate update of my financial position. I am aware that should any inconsistencies in what I have reported come to light, I may be required to repay all or part of any award received. I agree that my name and denominational affiliation may be released to the living contact of any bursary I receive.

NAME OF APPLICANT

SIGNATURE OF APPLICANT

DATE