

Financial Aid Office

Office of the Registrar, Highland Hall 160

www.utsc.utoronto.ca/registrar Email: askRO.utsc@utoronto.ca

2024 Summer - Full Time OSAP

Request to Change My Study Period

 No ☐ Yes If yes, estimate the amount of income you B. Scholarships, Awards, Tuition Waivers or Reimbursen Do you expect to receive a Scholarship, Award or Bursary If yes, provide the information below: Scholarship, Award, Tuition Waiver or Reimburseme 	nents r, Tuition Waiver or Reimbursement? No Yes						
B. Scholarships, Awards, Tuition Waivers or Reimbursen Do you expect to receive a Scholarship, Award or Bursary If yes, provide the information below:	nents r, Tuition Waiver or Reimbursement? No Yes						
B. Scholarships, Awards, Tuition Waivers or Reimbursen Do you expect to receive a Scholarship, Award or Bursary	nents						
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\square No \square Yes If yes, estimate the amount of income you	will earn during the entire study period: \$						
	ill as we dissipate a section as the control of						
A. Employment Income Do you expect to earn more than \$5,600 in employment i	income per term during your study period?						
Income Received <i>During</i> Your <mark>New</mark> Study Period	I						
Confirmation of Course Load for New Study Peric Please check our website for course load and other minimum							
New Study Period Requested:							
Original Study Period on My OSAP Application:							
Please change my original study period on my applica	ation to the new study period indicated below:						
Use this form to change the study period on your OSAP a all documents to the OSAP website (Print/Upload section							
	@mail.utoronto.ca						
U of T Email Address @ma							
Last Name U of T Email Address @ma	Phone #						

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2023 - 2024 FT OSAP Request to Change My Study Period

	ssistance from Governn t to receive financial ass	_	governmer	nt nrograms	during vo	our study period?	
□ No □ Ye		idicate the estimat	_				
	Source of Government Income				Amount		
Other Gover	nment Income Source						
If you have m	ore than 3 sources of go	vernment income,	please atta	ch an itemiz	ed list to	this form.	
do you and/o No As of the start If yes, If you are red	udy period. This date is r your spouse expect to o \(\subseteq \text{Yes If yes, enter the tof your study period, denter the total amount: \(\text{ucing} \) the amount origin asset valuation date on	have Registered Re e total <u>net</u> value: o you and/or your \$ ally reported on yo	\$ spouse hav	avings Plans .00 e other asse	s (RRSPs) [·] ·ts?	? ☐ No ☐ Yes	
study period a	ions: As an OSAP recipie and program informatio information on your ap	n, as well as study	period inco	me and fina	•	•	
must promptl information for Verification of should an ove eligibility. Fai	am providing complete by notify the Financial Aid or me and my parent(s) f income, when it occurs erpayment in loan and/o lure to verify the income ing a reduction in RRSPs	d Office, in writing, (or spouse) will be s, may result in a re or grant funding res e on my application	of any futu verified wit eassessment ult, this ove will result	re changes. h the Canad of my fund rpayment n in grant fun	I underst a Revenu ing for the nay affect ding being	tand that income e Agency (CRA). e academic year and my future OSAP g converted to a loan.	
Signature			Г)ate			

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