

Graduate Student Request for Financial Assistance

This form is to assist you if you are experiencing financial difficulty and is intended to be used in the order of assistance listed. Please fill out and obtain the appropriate signatures in each section.

Name			
ID Number			
Reason for requiring financial assistance.			
Amount required	\$		
1. My advisor is able to assist me.			
	<input type="checkbox"/> Yes	Amount	\$
	<input type="checkbox"/> No	Reasons why	
Signature of Advisor:			
2. I/my advisor have spoken to the Grad Coordinator/Chair of the Department			
Funding Available?	<input type="checkbox"/> Yes	Amount	\$
	<input type="checkbox"/> No	Reasons why	
Signature of Grad Co-ordinator/ Chair:			
3. I have spoken to the Associate Dean Research & Graduate Studies in my College			
Funding Available?	<input type="checkbox"/> Yes	Amount	\$
	<input type="checkbox"/> No	Reasons why	
Signature of Dean:			
4. I have applied for need assistance (Canadian citizens and permanent residents apply through Student Financial Services and International students apply through Benny Quay, International Student Advisor)			
Funding Available?	<input type="checkbox"/> Yes	Amount	\$
	<input type="checkbox"/> No		
Signature from SFS or Benny Quay:			
5. Please select one:			
<input type="checkbox"/> I have applied for OSAP or other Provincial/Federal Loan assistance and will be receiving \$ _____			

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<input type="checkbox"/> I do not qualify for OSAP or other Provincial Assistance for the following reasons: <hr/> <hr/>
6. Request for assistance from the Graduate Program Services \$ _____
Student Signature: _____