

SPOUSE/Common-LAW PARTNER INFORMATION

PURPOSE The information on this Appendix 2 determines how much your spouse/common-law partner may be required to contribute to help pay for your education.

WHO COMPLETES APPENDIX 2?

The applicant's spouse/common-law partner. If your spouse/common-law partner has arrived in Canada as a permanent resident and does not have a valid Social Insurance Number (SIN), apply as "married" and leave the SIN field blank. When your spouse/common-law partner has received a valid SIN, you must submit an Appendix 7 – Request for Reassessment with a copy of their SIN to StudentAid BC.

DO NOT COMPLETE THE APPENDIX 2 IF, AS OF THE FIRST DAY OF CLASSES:

- Your spouse/common-law partner is not a Canadian citizen or permanent resident AND does not live in Canada. Apply as "single";
- You have eligible dependent child(ren) under your care, living in Canada, AND your spouse/common-law partner is not a Canadian citizen or permanent resident (does not have a valid Social Insurance Number) and does not live in Canada. Apply as a single parent student.

ARE YOU COMMON-LAW?

You and your partner are considered to be common-law if you meet both of the following:

- you are currently living together in a marriage-like relationship; and
- you will have been living together for at least 12 consecutive months as of your first day of classes for this application.

DECLARATION AND CONSENT

Read, sign and date both the Canada Revenue Agency consent and the StudentAid BC declaration. Without the complete information including dates and signatures, we cannot process the student's application. Once you have completed Appendix 2, return it to the applicant to submit with his/her application. No faxes, scans or copies are accepted as original signatures are required.

**HELP FOR THE SPOUSE/
COMMON-LAW PARTNER****Question 18 Marriage/Common-law Date**

This is the date you were married or, if common-law, the date you began living together in a marriage like relationship.

Question 21 Separate Living Allowances

If you must live separately from the applicant during the study period, separate living allowances will be assessed.

Question 30 Total Income from 2019 Income Tax Return

Enter the amount from line 15000 of your 2019 income tax return. The amount you report will be checked against Canada Revenue Agency (CRA) records. If the amount you report is different from CRA records, CRA data will be used in the applicant's need assessment calculation and/or grant eligibility. If your previous year total income (as reported on line 15000 of your 2019 tax return) changes, a reassessment of the applicant's financial assistance application will be required. If you did not file a Canadian Income Tax Return for 2019, enter your total 2019 income from all sources both inside and outside Canada, which includes employment, pension investment, rental, RRSP, foster parent, net professional income, workers' compensation, employment insurance and disability assistance. Convert foreign currency into Canadian dollars. StudentAid BC receives regularly updated information from CRA and may, after the point of initial StudentAid BC application assessment, compare income amount(s) declared on the application against CRA records, to ensure that the applicant's financial need and/or grant eligibility remains up-to-date and accurate.

SUBMISSION INSTRUCTIONS

Upload signed Appendix 2 to the student's OR spouse's/common-law partner's dashboard. If an original ink signature is required, please mail the complete form to StudentAid BC. An incomplete or unsigned Appendix 2 will not be processed and will delay funding. Sign BOTH signature blocks.

If you have already submitted your StudentAid BC application, and you are completing an Appendix 2 to make changes to your original submission, include an Appendix 7 - Request for Reassessment, with your submission.

Appendix 2

STUDENT INFORMATION

ALL QUESTIONS MUST BE ANSWERED IN INK

STUDENT'S LAST NAME

STUDENT'S FIRST NAME

MIDDLE INITIAL

STUDENT'S SOCIAL INSURANCE NUMBER

STUDENT'S APPLICATION NUMBER
 2 0 2 0

SPOUSE / COMMON-LAW INFORMATION

(04) SOCIAL INSURANCE NUMBER (05) LAST NAME

(06) FIRST NAME MIDDLE (08) DATE OF BIRTH YEAR MONTH DAY (09) GENDER MALE FEMALE

(10) MAILING ADDRESS APT/SUITE STREET NUMBER AND STREET NAME/PO BOX

(11) USE THIS LINE FOR ANY PART OF YOUR ADDRESS NOT INDICATED ABOVE (12) CITY/TOWN

(13) COUNTRY (14) PROVINCE/STATE (15) POSTAL / ZIP CODE

(16) E-MAIL ADDRESS:

(17) AREA CODE () TELEPHONE NUMBER - YEAR MONTH

(18) Date of marriage or the date you began living together in a marriage-like relationship: Are you common-law? If YES please read the "help". {?} V V V Sign BOTH signature blocks.

CANADA REVENUE AGENCY CONSENT – must be signed and dated for this application to be complete

For the purpose of verifying the data provided in this application for student assistance, I hereby consent to the release, by the Canada Revenue Agency, to the Ministry of Advanced Education, Skills and Training (or a person delegated by the ministry), of taxpayer information from any portion of my income tax records that pertains to information given by me on any StudentAid BC application. The information will be used solely for the purpose of verifying information on my StudentAid BC application forms and for the general administration and enforcement of StudentAid BC policy and the Canada Student Financial Assistance Act. This authorization is valid for the two taxation years prior to the year of signature of this consent, the year of signature of this consent and for any other subsequent consecutive taxation year for which assistance is requested.

X	(50) SIGNATURE OF SPOUSE/Common-Law PARTNER (IN INK)	PRINT NAME	(51) DATE SIGNED
	MUST BE SIGNED	PRINT HERE	YEAR <input type="text"/> MONTH <input type="text"/> DAY <input type="text"/>
			<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>

StudentAid BC DECLARATION – must be signed and dated for this application to be complete

I. I understand that:

- The student will have access to information provided in this appendix;
- The student's school will have access to information provided in this appendix;
- The information in this appendix is subject to verification and investigation, as defined in the current program year's StudentAid BC Policy Manual.

II. I understand that signing the Declaration means:

- I declare that the information I have given is correct and complete and that I have not altered or added to any of the preprinted application and/or appendix questions;
- I authorize the student to notify StudentAid BC as soon as practical of any change in my total income as reported on line 15000 of my previous year's T1 General Income Tax and Benefit Return and/or other "assessed resources", as defined in the current program year's StudentAid BC Policy Manual;
- For the purposes of verifying the accuracy of the personal information provided by me in this appendix, I consent to the collection, use and disclosure of my personal information between the BC Ministry of Advanced Education, Skills and Training, the BC Ministry of Finance, the National Student Loans Service Centre, and any of their contractors, subcontractors or agents, each with each other, and with the following: financial institutions, lenders, educational institutions, financial aid offices, employers, credit bureaus, credit reporting agencies, Aboriginal Organizations, Federal and provincial Crown corporations, and federal, provincial, municipal ministries/departments/agencies, including but not limited to: BC Ministry of Social Development and Poverty Reduction, BC Ministry of Children and Family Development, BC Ministry of Health, BC Ministry of Attorney General, BC Ministry of Education, BC Public Service Agency, RoadSafe BC, Insurance Corporation of BC (and Service BC acting in the role of ICBC), BC Assessment Authority, Land Title and Survey Authority of BC, BC Registry Services, WorkSafe BC, BC Vital Statistics Agency, the Office of the Superintendent of Bankruptcy Canada, Employment and Social Development Canada, Canada Revenue Agency, and Immigration, Refugees and Citizenship Canada. This consent takes effect on the date that I make the first submission of this Appendix to StudentAid BC, regardless of whether this Appendix is in electronic or written format.

X	(52) SIGNATURE OF SPOUSE/Common-Law PARTNER (IN INK)	PRINT NAME	(53) DATE SIGNED
	MUST BE SIGNED	PRINT HERE	YEAR <input type="text"/> MONTH <input type="text"/> DAY <input type="text"/>
			<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>

Collection and use of information. The information included in this appendix and authorized above is collected and managed in accordance with sections 26(c) and 26(e) of the Freedom of Information and Protection of Privacy Act, R.S.B.C. 1996, c. 165, and under the authority of the Canada Student Financial Assistance Act, R.S.C. 1994, Chapter C-28 and StudentAid BC. The information provided will be used to determine eligibility for a benefit through StudentAid BC and for research, statistical and evaluation purposes. If you have any questions about the collection and use of this information, contact the Executive Director, StudentAid BC, BC Ministry of Advanced Education, Skills and Training, PO Box 9173, Stn Prov Govt, Victoria B.C., V8W 9H7, telephone 1-800-561-1818 toll-free in Canada/U.S. or +1-778-309-4621 from outside North America.



Appendix 2



StudentAidBC

ALL INFORMATION IS SUBJECT TO AUDIT AND VERIFICATION

SPOUSE / COMMON-LAW INFORMATION

STUDENT'S APPLICATION NUMBER

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- (19) During the applicant's study period, will you be employed full-time or part-time? YES NO
- (20) During the applicant's study period, will you be at home caring for eligible dependent child(ren) on a full-time basis for the entire study period? YES NO
- (21) During the applicant's study period, will you be living with the applicant during the study period? YES NO
- (22) Will you be a full-time post-secondary student for some or all of the applicant's study period? YES NO
- (23) If you will be a full-time post-secondary student during your spouse/common-law partner's study period, how many weeks of your spouse/common-law partner's study period will you also be in studies? _____ weeks
- (24) During the applicant's study period, provide total income assistance/social assistance (welfare) and/or B.C. income assistance for persons with disabilities that you will be receiving: \$

										.00
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- (25) During the applicant's study period, will you be in receipt of Employment Insurance (EI) benefits? YES NO
- (26) During the applicant's study period, will you be in receipt of federal or provincial Permanent Disability benefits? YES NO
- (27) During the applicant's study period, how much will you pay for your Canada Student Loan and/or provincial student loan regular scheduled payments? \$

										.00
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- (28) During the applicant's study period, how much will you pay for total day-care costs? (Only one parent may claim day-care costs.) \$

										.00
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- (29) During the applicant's study period, how much will you pay for child support and/or spousal support that you pay? \$

										.00
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- (30) Enter your reported total income from line 15000 of your 2019 income tax return. If you did not file a 2019 income tax return, enter your total income from all sources **both inside AND outside of Canada.** \$

										.00
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