

PART-TIME STUDIES – FINANCIAL ASSISTANCE

1. Canada student grant for persons with permanent disabilities
2. B.C. supplemental bursary for students with a permanent disability
3. Canada student grant for part-time students
4. Canada student grant for part-time students with dependants
5. Canada student loan for part-time studies

WHO IS ELIGIBLE?**PART-TIME STUDIES PROGRAMS****Applicants must:**

- Be a Canadian citizen, permanent resident (with valid Permanent Resident card or landing document), convention refugee or a protected person living in Canada.
- Be a resident of British Columbia.
- Be enrolled in a designated post-secondary educational institution in **Canada** in a program leading to a degree, diploma or certificate.
- Be studying between 20 per cent to 59 per cent of a full-time course load for a minimum of six weeks, leading to at least a 12-week program.
- Have a family income that falls below the tables in Section 4.
- Not be in default on previous full-time or part-time Canada student loans.
- If you have had previous funding from Canada student grants and loans for part-time studies, you must have successfully completed those study periods.

What expenses do the part-time funding programs cover?

- Tuition
- Compulsory fees
- Books and supplies
- An incidental allowance
- Local transportation allowance to and from classes
- Unsubsidized child care costs incurred to attend classes.

1. Canada student grant for persons with permanent disabilities

If you have a permanent disability that affects your ability to attend school (see definition on next page), you may qualify for a grant of \$2,000 per program year.

2. B.C. supplemental bursary for students with a permanent disability

You are a B.C. resident, and have a permanent disability, you may qualify for this program. If you study between 20 per cent to 39 per cent of a full-time course load, your program year maximum is \$400. If you study between 40 per cent to 59 per cent of a full-time course load, your program year maximum is \$800.

3. Canada student grant for part-time students

If your family income falls below the amount for your family size as shown in Section 4, you may qualify for the grant for part-time students of up to \$1,800 per program year.

4. Canada student grant for part-time students with dependants

The Canada student grant for part-time students with dependants is available for students with dependent children under the age of 12 and/or a permanently disabled dependant who is 12 years of age or older at the beginning of the study period. To be eligible, students must meet the following:

The grant will not exceed the lesser of:

- The student's assessed need;
- \$40 per week of study for students with one or two dependants;
- \$60 per week of study for students with three or more dependants; or
- To a maximum of \$1,920 per program year.

The Canada student grant for part-time students with dependants is based on assessed need and not a minimum part-time loan disbursement. You may be eligible for the grant if you meet all the following criteria:

- Attend a designated post-secondary institution in Canada on a part-time basis;
- Have a dependant under the age of 12 and/or a permanently disabled dependant who is 12 years of age or older.

Eligibility for the Canada student grant for part-time students with dependants uses a progressive eligibility threshold whereby the grant amount decreases as family income increases.

5. Canada student loan for part-time studies

Part-time Canada student loan funding is available to students studying part-time (20 to 59 per cent of a full-time post-secondary course load), whose income falls below a pre-determined threshold. This funding is a loan and must be repaid. Only \$10,000 of original principal may be outstanding at any time (not including capitalized interest).

The first payment on a Canada student loan for part-time studies is due six months after the student leaves part-time studies.

Part-time Canada student loans are interest-free while students are in part-time or full-time study (confirmation of enrolment is required).

- Your fully complete and correct application must be received by StudentAid BC at least **six weeks before the DATE CLASSES END**;
- Section 9 must be completed by your school and attached to your application;
- No faxes, scans or copies are accepted as original signatures are required.

IF YOU ARE A STUDENT WITH A PERMANENT DISABILITY

If you are a student with a permanent disability as defined below, you may be eligible for additional student financial assistance.

“Permanent disability” for the purposes of student financial assistance means a “functional limitation caused by a physical or mental impairment that restricts the ability of a person to perform the daily activities necessary to participate in studies at a post-secondary level or in the labour force and is expected to remain with the person for the person’s expected natural life.”

Note:

Not all medical conditions are considered permanent disabilities for the purpose of StudentAid BC permanent disability funding.

To be considered for the permanent disability funding listed on Page 2, you must:

- Document your permanent disability status by completing an Appendix 8 – Permanent Disability Programs Application at www.StudentAidBC.ca.
- Section 4 of the Appendix 8 must be completed by a qualified medical assessor in Canada.
- Your physician or other qualified medical assessor must clearly indicate how your disability impacts you on a daily basis in an educational setting.

IF YOU HAVE PREVIOUSLY HAD YOUR PERMANENT DISABILITY STATUS APPROVED BY StudentAid BC, YOU DO NOT NEED TO RESUBMIT APPENDIX 8 .

Note:

If your permanent disability status is not approved by StudentAid BC six weeks before the end of classes, any funding from your current financial aid application will not include grants for students with permanent disabilities.

B.C. public post-secondary institutions have disability coordinators who may assist you with the process of submitting the appropriate documentation to StudentAid BC for verifying your permanent disability.

CONTACT INFORMATION

TO REACH StudentAid BC BY PHONE:
1-800-561-1818 Toll-free in Canada or USA
 or **250-387-6100** from outside North America

TO REACH StudentAid BC BY MAIL:
StudentAid BC

Mailing address:
 P.O. Box 9173 Stn Prov Govt
 Victoria BC V8W 9H7

Courier address: StudentAid BC
 1st Floor, 835 Humboldt Street
 Victoria BC V8V 4W8

Visit us on-line at www.StudentAidBC.ca



Part-time Studies APPLICATION



StudentAidBC

FOR CLASSES STARTING BETWEEN AUGUST 1, 2019 AND JULY 31, 2020

SECTION 1 OF 9 – APPLICANT’S PERSONAL INFORMATION

(01) Legal LAST NAME

(02) Legal FIRST NAME

(03) Legal MIDDLE NAME

(04) MAILING ADDRESS – IMPORTANT: All mail will be sent to this address

Apt./Suite Street Number and Street Name/PO Box

(05) Use this line for any part of your address not indicated above

(06) CITY/TOWN

(07) PROVINCE/STATE _____ (08) POSTAL/ZIP CODE _____

Your application number will be assigned once processed:

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(09) AREA CODE TELEPHONE NUMBER

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(10) E-MAIL ADDRESS:
Notifications MAY be sent to this address

(11) SOCIAL INSURANCE NUMBER

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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(12) DATE OF BIRTH

YEAR				MONTH		DAY	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(13) GENDER MALE FEMALE

(14) STUDENT NUMBER
(mandatory if at a B.C. public school)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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DEFINITION OF COMMON-LAW for StudentAid BC. If you are not married but are living in a marriage-like relationship for at least 12 consecutive months as of the first day of classes, you are considered “Common Law”. If you are married or in a common-law relationship, have your spouse complete and sign BOTH declarations to ensure your application can be processed.

(15) STATUS as of the first day of classes. (MARK ONE BOX ONLY)

SINGLE
 SINGLE PARENT
 MARRIED
 COMMON-LAW
 SEPARATED/DIVORCED/WIDOWED

(16) Citizen Status: Canadian Citizen Protected Person Permanent Resident

If you are not a Canadian citizen, you must attach a copy of your Canadian Immigration document.

RESIDENCY

- (17) Have you lived in B.C. for 12 continuous months not including full-time post-secondary study? YES NO
- (18) Have you ever declared bankruptcy that included student financial assistance? YES NO
- (19) Are you currently in default of a Canada student loan (full-time or part-time)? YES NO
- (20) Are you a student with a permanent disability applying for permanent disability grants? YES NO

Notes:
 * If you are a student with a permanent disability, please read page 2 of the instructions before answering Question 20.
 * If you answered YES to Question 20 AND you have not received StudentAid BC approval of your permanent disability for the purposes of study, you must submit a permanent disability programs application (Read page 2 of the instructions).

Your fully complete and correct application must be received by StudentAid BC at least **six weeks before the DATE CLASSES END.**

(Section 9 must be completed by your school and mailed with the application).
 No faxes, scans or copies are accepted as original signatures are required.

MINISTRY USE ONLY

SECTION 2 of 9 – DEPENDANT INFORMATION

DEFINITION OF DEPENDANTS

For StudentAid BC purposes, eligible dependants are any dependants for whom you receive the Canada Child Benefit or for whom you claim a benefit on your 2018 income tax return. To be eligible, a dependant must meet one or more of the following criteria:

- Be your child(ren) and/or your spouse/common-law partner's child(ren) under 19 years of age as of the start of your classes, for whom you have custody, or provide care (they live with you), at least two full days per week during your entire study period; or
• Be your child(ren) and/or your spouse/common-law partner's child(ren) age 19 or over who are full-time dependent students (read definition of dependent status in Instructions Book on www.StudentAidBC.ca); or
• Be your permanently disabled child(ren) and/or your spouse/common-law partner's permanently disabled child(ren) age 19 or over, who you fully support and declared on your 2018 income tax return; or
• Be your permanently disabled spouse/common-law partner who you fully support and declared on your 2018 income tax return; or
• Be your foster child(ren), if foster parent income is claimed on this application; or
• Be your elderly relatives and/or your spouse/common-law partner's elderly relatives who you fully support and have declared on your 2018 income tax return.

Note: If you are expecting a child, please submit a part-time studies request for reassessment form after the birth of the child and attach a copy of the birth certificate.

(21) DEPENDANTS

Do you have any eligible dependants as defined above?

YES NO

If YES, list them below. If you do not have any eligible dependants, proceed to the next section.

FULL NAME OF DEPENDANT (ONLY INCLUDE SPOUSE/COMMON-LAW PARTNER IF THEY ARE PERMANENTLY DISABLED)

DATE OF BIRTH YEAR MONTH DAY

WILL ELIGIBLE DEPENDANT BE ATTENDING HIGH SCHOOL OR POST-SECONDARY FULL-TIME AT THE START OF YOUR STUDY PERIOD?

YES NO

WAS THIS DEPENDANT (AS DEFINED ABOVE) CLAIMED ON YOUR 2018 TAX RETURN?

YES NO

(22) Total unsubsidized day-care costs (during class hours for the proposed study period for children 11 years of age and under (at the start of classes)

\$.00

(23) Total unsubsidized day-care costs during class hours for the proposed study period for disabled/infirm dependants 12 years of age and older.

\$.00

SECTION 3 of 9 – STUDENT INCOME

STUDENT GROSS INCOME

If you filed a 2018 Income Tax Return, answer *Question 24* then GO TO *Question 32*.

- (24) Reported **gross** income from line 150 of your 2018 Income Tax Return \$.00
 If you did NOT file a 2018 Income Tax Return, answer *Questions 25 to 31*. Enter your gross income from all sources inside and outside of Canada, from January 1, 2018 to December 31, 2018. Enter "0" if no value.
- (25) Income assistance (welfare) and/or B.C. income assistance for persons with disabilities \$.00
- (26) Employment insurance benefits (Service Canada – ESDC) \$.00
- (27) WCB benefits \$.00
- (28) Employment program for persons with disabilities income (EPPD) \$.00
- (29) Gross earnings (wages) from employment or net self-employment (including co-op earnings, assistantships) \$.00
- (30) Child care subsidy (only one parent may claim child care subsidy) \$.00
- (31) Other sources of income (First Nations bands, pension, child support, spousal support payments, monetary gifts, sponsored tuition, etc.). Do not include Canada Child Benefits or Income Tax refunds. \$.00

SECTION 4 of 9 – REQUEST OR DECLINE LOAN

(32) I understand that if I qualify for loan funding, interest at the floating prime interest rate plus 2.5 per cent, will begin to be charged once I graduate or leave school, and that I am required to start making payments (interest and principal) six months after my period of study end date.

Knowing this information I choose YES, I want to receive loan NO, I do NOT want to receive the loan (YOU MUST PICK ONE)

Family Income Eligibility Thresholds for the Canada Student Loan for Part-Time Students (CSL-PT), Canada Student Grant for Part-Time Students and the Canada Student Grant for Part-Time Students with Dependants for the 2019-2020 Program Year:

Family Size	Gross Maximum Annual Family Income			
	Canada Student Loan for Part-Time Students (CSL-PT)	Canada Student Grant for Part-Time Students (CSG-PT)	Canada Student Grant for Part-Time Students with Dependants (CSG-PTDEP)	
			For students with one or two dependants:	For students with three or more dependants:
1	\$64,061	\$31,243	n/a	n/a
2	\$89,595	\$44,184	\$44,184	n/a
3	\$106,890	\$54,114	\$54,114	n/a
4	\$117,490	\$62,485	\$62,485	\$62,485
5	\$127,292	\$69,861	\$69,861	\$69,861
6	\$136,611	\$76,529	\$76,529	\$76,529
7+	\$144,650	\$82,660	\$82,660	\$82,660

SECTION 7 of 9 – StudentAid BC – STUDENT DECLARATION – IMPORTANT DOCUMENT

I am applying for funding to assist with my education under one or all of the following programs: Canada Student Loan for Part-time Studies, Canada Student Grant for students with Permanent Disabilities, the BC Supplemental Bursary for Students with a Permanent Disability, Canada Student Grant for Part-time Students, and if eligible, Canada Student Grant for Part-time Students with Dependants.

I. I understand that:

1. **It is against the law** to make false or misleading statements on this application or all documents related to it.
2. It is my responsibility to make sure the information on this application, and/or all the documents forming part of it are accurate.
3. **All information is subject to audit and verification.**
4. If I do not provide complete, accurate information or if I obtain or attempt to access financial assistance by fraudulent means, I may be denied any further federal or provincial student financial assistance, including full- and part-time Canada Student Loans and Grants, now or in the future.
5. If I receive money (loan or grant) and then it is discovered that this application, or documents forming a part of it, are not accurate, I will be required to repay all or part of the money, with interest. I will be required to do this if my spouse or common law partner, post-secondary institution, StudentAid BC or I made the mistake.

II. I understand that by signing my name on this application form means:

1. I certify that all information is complete and accurate and I have not altered or added to any of the StudentAid BC application and/or questions;
2. I will use the money I receive to pay my academic fees first.
3. None of the courses used to meet the minimum 20 per cent course load requirements are repeats/duplicates of courses for which I previously received credits.
4. I must pass at least 20 per cent of a course load for the study period that I have applied for, or my eligibility for student financial assistance in future years of part-time studies will be affected.
5. I will immediately notify the financial aid office of any increase in my or my spouse/common-law partner's, income and of any changes in my address, academic status (e.g., course load study period), marital status, or reduced number of dependants.
6. I consent to the exchange of information between StudentAid BC, the post-secondary institution and/or other appropriate financial aid office about my academic standing, awards, program of study, course load, attendance, living arrangements, marital status and financial status. This consent takes effect when I sign this declaration.
7. I consent to the verification of my Social Insurance Number, name, date of birth and gender, with information contained in Employment and Social Development Canada Social Insurance Registry. This information will be disclosed to Employment and Social Development Canada for the purpose of confirming the accuracy of my identification in the context of this application for a Canada Student Loans and Grants for part-time studies. This consent takes effect when I sign this declaration.
8. For the purpose of verifying and/or investigating information pertaining to this application, related documents, and the eventual repayment of my loan awards, whether defaulted or not and any other money repayable, I consent to the collection, use and disclosure of my personal information between the Ministry of Advanced Education, Skills and Training (or its agent) and the following agencies, financial institutions, Canadian Imperial Bank of Commerce, Royal Bank, Bank of Nova Scotia, post secondary institutions, credit agencies, WorkSafe BC, Superintendent of Bankruptcy Canada, other financial aid offices, Land Title and Survey Authority of BC, BC Registry Services, BC Ministry of Social Development and Poverty Reduction/employment program for persons with disabilities (or a contracted agent of that Ministry), BC Ministry of Children and Family Development, BC Ministry of Attorney General, BC Ministry of Finance, BC Ministry of Education, National Student Loans Service Centre, Immigration, Refugees and Citizenship Canada, RoadSafe BC, Insurance Corporation of BC (and Service BC acting in the role of ICBC), BC Assessment Authority, Employment and Social Development Canada, Crown corporations, native bands, federal, provincial, municipal ministries/departments/agencies. This consent takes effect when I sign this declaration.
9. I have not applied nor will I apply to or receive government funded student loans, grants or bursaries from another province or territory or government funded loans outside of Canada during the study period stated in this application.

Collection and use of information. The information included in this form and authorized above is collected under Sections 26c and 26e of the *Freedom of Information and Protection of Privacy Act* 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 statistical and evaluation purposes. If you have any questions about the collection and use of this information, contact the Director, StudentAid BC, Ministry of Advanced Education, Skills and Training, PO Box 9173, stn Prov Govt, Victoria, BC V8W 9H7, call 1-800-561-1818 (toll-free in Canada/U.S.) or (250) 387-6100 from outside North America.

Copies, faxes or scanned signatures cannot be accepted.

X	<p>(47) SIGNATURE OF STUDENT (IN INK)</p> <p style="text-align: center; font-size: 24px; color: grey;">MUST BE SIGNED</p>	<p>PRINT NAME</p> <p style="text-align: center; font-size: 24px; color: grey;">PRINT HERE</p>	<p>DATE SIGNED</p> <p style="text-align: center;">YEAR MONTH DAY</p> <p style="text-align: center;"> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> </p>
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CANADA REVENUE AGENCY CONSENT – IMPORTANT DOCUMENT- READ, SIGN AND DATE

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 relevant to, and used solely for the purpose of determining and verifying my information and for my spouse's eligibility for and entitlement to the following programs: Canada Student Grant for students with Permanent Disabilities, the BC Supplemental Bursary for Students with a Permanent Disability, Canada Student Grant for Part-time Students, Canada Student Loan for Part-time Studies, and if eligible, Canada Student Grant for Part-time Students with Dependants under the *Canada Student Financial Assistance Act*. This information will not be disclosed to any other person or organization without my prior approval. 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	<p>(48) SIGNATURE OF STUDENT (IN INK)</p> <p style="text-align: center; font-size: 24px; color: grey;">MUST BE SIGNED</p>	<p>PRINT NAME</p> <p style="text-align: center; font-size: 24px; color: grey;">PRINT HERE</p>	<p>DATE SIGNED</p> <p style="text-align: center;">YEAR MONTH DAY</p> <p style="text-align: center;"> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> </p>
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- Once you have signed #47 and #48 please complete Section 8 on Page 8.
- Your school must also complete Section 9 on Page 8.
- Your application will not be processed without the study information and both signatures.



Part-time Studies APPLICATION



StudentAidBC

STUDENT NAME: LAST _____
FIRST _____

THIS IS YOUR PART-TIME STUDIES APPLICATION NUMBER

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SECTION 8 of 9 – STUDY INFORMATION (STUDENT COMPLETES THIS SECTION)

Name of School and Campus (e.g., Camosun College Interurban) _____

Program Name _____

Course Name	Course Number	Start Date			End Date		
		YEAR	MONTH	DAY	YEAR	MONTH	DAY
_____	_____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

SECTION 9 of 9 – MUST BE GIVEN TO YOUR SCHOOL TO COMPLETE

INCOMPLETE INFORMATION WILL DELAY THE APPLICATION FROM BEING PROCESSED.

(49) SCHOOL CODE _____	(50) DATE CLASSES START YEAR MONTH DAY <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	(51) DATE CLASSES END YEAR MONTH DAY <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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If unknown, check designated schools; search on www.StudentAid BC.ca

(52) PROGRAM CODE B.C. Public and Private School Officials: Enter eligible program code. Studying outside of B.C.? Leave program code blank.

(53) Level of study (Mark one box only)	<input type="checkbox"/> A CERTIFICATE	<input type="checkbox"/> C UNIVERSITY TRANSFER	<input type="checkbox"/> E MASTER	<input type="checkbox"/> G PROFESSIONAL
	<input type="checkbox"/> B ASSOCIATE/DIPLOMA	<input type="checkbox"/> D BACHELOR	<input type="checkbox"/> F DOCTORATE	<input type="checkbox"/> H UNCLASSIFIED/QUALIFYING
(54) Field of study	<input type="checkbox"/> A ADMINISTRATION/BUSINESS	<input type="checkbox"/> D DENTISTRY	<input type="checkbox"/> G LAW	<input type="checkbox"/> J COMMUNITY SERVICE/EDUCATION
	<input type="checkbox"/> B AGRICULTURE & RELATED	<input type="checkbox"/> E HEALTH SCIENCES	<input type="checkbox"/> H THEOLOGY	<input type="checkbox"/> K ENGINEERING/TECHNOLOGY
	<input type="checkbox"/> C ARTS/SCIENCES	<input type="checkbox"/> F MEDICINE	<input type="checkbox"/> I TRADES	

EDUCATIONAL COSTS

(55) Year of study (in the program, 1 – 4) _____	(58) Tuition	\$	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
(56) Percentage of a full-time course load _____	(59) School Fees	\$	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
(57) Are ALL the courses distance/correspondence? <input type="checkbox"/> YES <input type="checkbox"/> NO	(60) Books and Supplies	\$	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>

(61) FINANCIAL AID OFFICER – LAST NAME _____

OFFICIAL SCHOOL STAMP OR SEAL

(62) FINANCIAL AID OFFICER – FIRST NAME (s) _____

REQUIRED

(63) AREA CODE () TELEPHONE NUMBER -

Mail form to: StudentAid BC
PO Box 9173 Stn Prov Govt
Victoria BC V8W 9H9

X	(64) SIGNATURE OF SCHOOL FINANCIAL OFFICER (IN INK)	(64a) DATE SIGNED
	MUST BE SIGNED	YEAR MONTH DAY <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Do not separate this page from the application.