



**Student Income Update (to be completed by student)**

Indicate the amount of income you received or expect to receive from all sources during your two study periods as provided by your school, above. The information you provide will be used to reassess your 2016-2017 OSAP Application for Full-Time Students.

**630 Type and amount of government income:**

	<b>Study Period 1</b> (see column D & E in row 1 on above chart)	<b>Study Period 2</b> (see column D & E in row 2 on above chart)
<input type="checkbox"/> Employment Insurance	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Loss of Earnings Benefits (WSIB)	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Ontario Disability Support Program	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Ontario Works	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Postsecondary Student Support Program	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Canada Pension Plan (Orphans' Benefits, Survivors' Benefits, Disabled Contributors' Child's Benefits)	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Second Career	\$ <input type="text"/>	\$ <input type="text"/>
<input type="checkbox"/> Other	\$ <input type="text"/>	\$ <input type="text"/>
Specify Source:	<input type="text"/>	<input type="text"/>

**626 Scholarships, bursaries, and/or awards:** \$  \$

**661 Educational Assistance Payments from a Registered Education Savings Plan (RESP) and payments and/or interest and dividends earned on trust funds or other educational savings plans:** \$  \$

**620 Employment income:** \$  \$

**621 Income from all other sources, world-wide:** \$  \$

**600 If there was a break in your studies and you did not attend classes for more than 4 weeks, indicate the amount of income that you received during the time period between study periods.** \$

**Declaration and Signature of Student**

I declare that I have given complete and true information on this form.

**Signature of student:**

**Date:**

Month Day Year

Your personal information will be used to administer and finance the Ontario Student Assistance Program (OSAP) as set out in the notice of Collection and Use of Personal Information on your OSAP application form and in accordance with the consents you signed on your OSAP application form. The Ministry of Advanced Education and Skills Development administers and finances OSAP under the legal authority set out on your OSAP application form. If you have any questions about the collection, use and disclosure of your personal information, contact the Director, Student Financial Assistance Branch, Ministry of Advanced Education and Skills Development, PO Box 4500, 189 Red River Road, Thunder Bay, ON P7B 6G9; (807) 343-7260.