

## **Purpose**

Use this form if any of the following apply to you:

- You selected either of the following residency responses on your 2020-21 OSAP Application for Full-Time Students:
  - I reside in Ontario AND my parent(s) and I have resided in Canada for less than 12 months in a row; or
  - I reside in Ontario AND none of the previous statements apply to me.
- You selected “I have always lived in Ontario” and your Social Insurance Number starts with 1, 2, 3, 7 or 9.

Because of the response you selected, you must provide details on your residency history for the past 5 years, as well as for your parent(s) who are included on your OSAP application. Information about any full-time postsecondary studies you have taken during that time is also required.

The information will be used by the ministry to determine if you meet the Ontario residency requirements for OSAP purposes.

## **How to complete this form**

This form has 4 sections. You will be completing all sections.

If you and your parent(s) did not live at the same address at any time during the past 5 years, their address details, including the dates they lived at the address, must be provided in addition to your own address details.

Both you and your parent(s) must sign this form and any attachments provided.

## **How to submit this form**

You can upload your completed form online. Log into the OSAP website and go to your application to use the “Print or upload documents” button. Or, you can submit a paper copy as follows:

### **If you’re going to a school in Ontario:**

Send this completed form and all attachments (if applicable) to your school’s Financial Aid Office.

### **If you’re going to a school outside of Ontario:**

Send this completed form and all attachments (if applicable) to: Student Financial Assistance Branch, Ministry of Colleges and Universities, PO Box 4500, 189 Red River Road, 4th Floor, Thunder Bay, Ontario, P7B 6G9.

## **Deadline**

This form and all attachments (if applicable) must be received by your financial aid office or the ministry no later than 40 days before the end of your 2020-21 study period.

















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## Section D: Parental and student declarations and signatures

### Part 1: Parent(s)

I declare that the information provided about me on this form, as well as on any attachments is complete and true.

#### Parent 1

Parent 1 first name:

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Parent 1 last name:

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Signature of Parent 1:

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Date:

Day Month Year

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#### Parent 2

Parent 2 first name:

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Parent 2 last name:

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Signature of Parent 2:

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Date:

Day Month Year

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### Part 2: Student

I declare that the information provided on this form, as well as on any attachments is complete and true.

Signature of student:

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Date:

Day Month Year

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Your personal information, as well as the information on your parent(s), 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 and in accordance with the consents you signed on your OSAP application. The Ministry of Colleges and Universities administers and finances OSAP under the legal authority set out on your OSAP application. If you have any questions about the collection, use and disclosure of personal information, contact the Director, Student Financial Assistance Branch, Ministry of Colleges and Universities, PO Box 4500, 189 Red River Road, Thunder Bay, Ontario, P7B 6G9; 807-343-7260.