



# APPLICATION FOR FINANCIAL ASSISTANCE

## FULL-TIME STUDIES – FALL/WINTER 2018-2019

### Important Information:

- Deadline for submission to Student Services Office: **Friday, August 17, 2018** (*for a Winter Term Only application, the deadline is December 7, 2018*). **Important Information:**
  - Returning Students: Applications received after the deadline will only be considered if there are extenuating circumstances.
  - Incoming Students: Students recently accepted for admission will have five (5) days after receipt of their ADC admissions letter to apply for financial assistance.
- Financial assistance will only be considered for students with demonstrated financial need.
- Students who are already in receipt of tuition reduction (i.e. Seniors, and students with documentation showing they are full-time staff with Intervarsity, Navigators and Power to Change) are not eligible to receive financial assistance.
- If awarded, financial assistance will be sent to Student Accounts of Acadia University to be applied directly to the student's account.
- If you are in receipt of an **ADC Entrance Scholarship**, you are **not** eligible to receive this additional financial assistance.

I am applying for:     Fall & Winter Term                       Fall Term Only                       Winter Term Only

### STUDENT INFORMATION

Name:	_____	Student Number:	_____
Street Address:	_____	Program of Study:	_____
City & Province:	_____	Postal Code:	_____
Telephone:	_____	Social Insurance No.:	_____
Do you have an outstanding Student Loan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Will you apply for a student loan in 2018/2019?	<input type="checkbox"/> Yes <input type="checkbox"/> No

### DECLARATION & SIGNATURE

- I understand that my request for financial assistance is based on financial need. By making this application request, I certify that my projected household and expenses for the current year/term are greater than my projected household income.
- I declare this information to be true to the best of my knowledge. I understand that if my application is audited, I may be required to provide details to support my claim that my household expenses are greater than my household income. I agree to advise Acadia Divinity College if there is any significant reduction in my financial need during this academic term.
- I declare that I have registered as a full time student for the current year/term.
- I understand that if my status changes from full-time to part-time during the year, the financial assistance will be reduced to the amount that would be eligible under the part-time assistance program. The amount of the overpayment will have to be repaid to ADC. In addition, I understand that if I completely withdraw from my studies during the current year/term that the full amount of the financial assistance received will have to be repaid to ADC.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

<i>Office Use Only</i>	ADC Registrar's Approval: _____
Amount to be Awarded: \$ _____	Date: _____

Please email the completed form to: [adcstudentservices@acadiu.ca](mailto:adcstudentservices@acadiu.ca)