



## Graduate Student Financial Profile Fall/Winter 2015-2016

### Protection of Privacy:

- Personal information in connection with this application is collected under the authority of The York University Act, 1965 and is needed for educational, administrative and statistical purposes, and to process your application and decide on your eligibility for the programs you indicate below.
- Once an award or bursary has been granted, York University may disclose certain information to the donor of the award, the Division of Advancement, provincial funding organizations and/or York University academic departments/Faculties and Colleges, as set out in the Declaration and Consent section.
- If you are the recipient of a scholarship, your name and photograph may be used for promotional purposes as set out in the Declaration and Consent section.
- If you have any questions about the collection, use and disclosure of your personal information by York University, please contact: Office of the Dean, Faculty of Graduate Studies, 230 York Lanes, York University, 4700 Keele Street, Toronto ON, M3J 1P3, (416) 736-5521.

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### Application Deadline: Friday, January 15, 2016

The Student Financial Profile is a multi-purpose application form that is used to apply for scholarships, awards, and bursaries.

Who Can Submit the SFP:

- Current graduate students (excluding students from Osgoode, and MBA, MPA, EMBA, MF, IMBA, MBAN and MACC students in Schulich)

### Award Program Selection

I am submitting this Student Financial Profile so that I can be considered for all the programs I have chosen below:

- Graduate Bursary Program
- Graduate Scholarships and Awards

### Please submit this Graduate Student Financial Profile to the following address:

Office of the Dean, Faculty of Graduate Studies  
York University  
230 York Lanes,  
4700 Keele St.,  
Toronto, ON, M3J 1P3

## Personal Information

Student Number:	Social Insurance Number:	
Surname:	First Name:	
E-mail:		
Program: - please select -		
Degree and level of study: - please select -		
Current registration status	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
I am a Canadian Citizen, Permanent Resident OR Protected Person	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I am an international student	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Aboriginal status (optional): I am an Aboriginal student and identify as such per my institution's Aboriginal self-identification policy. This assertion means that I identify as a member of the First Peoples of Canada meaning, in general terms, First Nation, Metis, Inuit, Indigenous, Aboriginal or specifically by my home community or my Nation.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I am a current member of CUPE 3903 Unit 1 (i.e. Teaching Assistant)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I am a current member of CUPE 3903 Unit 3 (i.e. Graduate Assistant)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have a disability, as defined by the Ontario Human Rights Code.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I have a medical condition that has impacted my academic progress.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Please check ONE of the following statements that best describes your status:</b>		
	Sole-support parent with any number of dependent children under 16 years of age	
	Married student with any number of dependent children under 16 years of age and an unemployed spouse	
	Married student with any number of dependent children under 16 years of age and a spouse who receives OSAP	
	Married student with any number of dependent children under 16 years of age and a spouse who is employed	
	Married student without children and an unemployed spouse	
	Married student without children and a spouse who receives OSAP	
	Single student who pays rent	
	Married student without children and a spouse who is employed	
	Single student who does not pay rent	

## Ontario Residency

Please check **ONE** of the following statements that best describes your current residency status:

	I have always resided in Ontario <b>or</b> Ontario is the last province in which I resided for 12 months in a row without being a full-time postsecondary student.
	My spouse has always resided in Ontario <b>or</b> Ontario is the last province in which my spouse resided for 12 months in a row without being a full-time postsecondary student. (Spouse is defined as the person to whom you are married or the person with whom you are living in a common law relationship.)
	Ontario is the last province my parent(s), step-parent, legal guardian, or official sponsor(s) has resided in for 12 months in a row.
	I am from another Canadian province or territory.
	I am an international student.
	I am a Canadian citizen and I and/or my parents/spouse have not been living in Canada for the past 12 months in a row.

## Financial Resources

Please outline your expected financial resources for the number of months for which you expect to be registered in the academic year (typically the months between September and August).

Personal savings prior to the start of the academic year	\$
Applicant's expected income from CUPE Unit 1 (TAsnip) and/or CUPE Unit 3 (GAsnip)	\$
Applicant's expected income from RAsnip	\$
Applicant's expected other income	\$
Spouse's contribution to household resources (50% of spouse's expected income before tax deduction)	\$
Total amount of internal awards, scholarships, and bursaries you expect to receive	\$
Please provide the internal award names:	
Total amount of external awards, scholarships, fellowships you expect to receive	\$
Please provide the external award names:	
Line of credit from a bank/ bank loan	\$
Expected income from government benefits (i.e. EI, Ontario Works, CPP, etc.)	\$
Please specify the government benefits received:	
Expected annual amount from Ontario Government Student Assistance (OSAP) or Government Student Assistance from other provinces	\$
Other Resources #1	\$
Please specify:	
Other Resources #2	\$
Please specify:	
<b>TOTAL EXPECTED INCOME</b>	<b>\$</b>

## Expenses

Please outline your expected expenses for the number of months for which you expect to be registered in the academic year. Must be for the same period of months as indicated in the Financial Resources section.

Tuition & registration fees	\$		
Tuition fee waiver: (If you are a senior, or an employee at York eligible for the waiver, or a dependent/spouse/partner of a York employee eligible for the waiver)	(\$ )	Tuition – waiver:	
Books and academic supplies	\$		
Medical & dental costs (not covered by OHIP, UHIP, YUGSA, CUPE 3903 health plans)	\$		
Monthly household living expenses	A) Monthly Amount	B) # Months Registered	C) Total (A x B = C)
Accommodation	\$		\$
Utilities (gas, hydro/electricity, water, etc.)	\$		\$
Food and personal expenses	\$		\$
Transportation	\$		\$
Telephone, internet, cable	\$		\$
Net childcare cost (after deduction from CUPE 3903 Childcare Fund or other childcare subsidies)	\$		\$
Other expenses #1	\$		
Please specify:			
Other expenses #2	\$		
Please specify:			
TOTAL EXPECTED EXPENSES	\$		
TOTAL NET INCOME	\$		

## Reason for Bursary Application

BURSARY APPLICATIONS ONLY: Please explain why you are applying for financial assistance, including any special circumstances. **Note:** You may be asked to give supporting documentation when your application is reviewed. Do not send any documentation unless you are requested to do so. For reasons of confidentiality, please do not provide your name in this section. (Max 2000 characters)

## Statement of Interest

SCHOLARSHIP AND AWARD APPLICATIONS ONLY: If you would like to be considered for an award with specific eligibility or assessment requirements, be sure to provide the name of the award and highlight how you meet the requirements (max 2000 characters)

## Agreement

By submitting this Student Financial Profile, I have read and agree to the following:

- I declare that the information I have provided in this application is **true, complete and accurate**.
- I understand that all information I have provided in connection with this application is subject to **verification and audit** by York University.
- I will provide supporting documentation to York University to verify my eligibility **upon request**.
- I understand that any funds I receive will be applied to my student account at York.
- I consent to the disclosure by York University of personal information I have given on this application as follows:
  - To other educational institutions and the Ministry of Training, Colleges and Universities (for OSAP purposes) to verify its completeness and accuracy.
  - Should I be selected to receive an award, to the donor of the award, the Division of Advancement and other educational institutions the following information: my name, my award, program of study, year level, the amount of my award and personal information that confirms the reason for the award grant. To opt out, please send a written request to Scholarships & Bursaries Unit, Student Financial Services, W223 Bennett Centre for Student Services, York University, 4700 Keele Street, Toronto, Ontario, M3J 1P3; and
  - Should I be selected to receive a scholarship, my name, program of study, year level and photograph for promotional purposes.

Student's Signature	Date
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**NOTE:**

**Please review the information you have entered carefully. If you are applying to a specific scholarship or award, please attach this form to your scholarship/ award application.**