

**Purpose**

Use this form to request the grant(s) for which you are eligible to receive and to decline the Canada-Ontario Integrated Student Loan. In order to make this request, you must have already submitted a **2016-2017 OSAP Application for Full-Time Students** and have received an assessment of the amount of funding you are eligible to receive.

**If you haven't received any loan:**

Once you know how much funding you are getting, you may decide to take the grant(s) only. You need to submit this form to your financial aid office no later than 30 days before the release of your 1st installment. For most students starting classes in September, you'd have to submit this form to your financial aid office by August 1st.

- ▶ Since you haven't received any of your loan, none of it will be released.

**If you've received some of your loan:**

If you've received your 1st installment of loan, you can still request the remaining grant(s) only. You need to submit this form to your financial aid office no later than 30 days before the release of your 2nd installment. For most students, the 2nd installment is released early January so you'd have to submit this form to your financial aid office by December 1st.

- ▶ In this case, the 2nd installment of loan will not be released.

**If you've received all of your loan:**

Since the entire loan has been given to you, you are not able to request grant only. However, you have the option of repaying your loan immediately. Contact the National Student Loans Service Centre (NSLSC) for details on repayment options.

**Changed your mind?**

If you find that you need the loan after all, you may change your mind. No funding is ever released after your study period has ended, so you'll have to contact your financial aid office no later than 60 days before the end of your study period. In this case, you will receive the amount of loan that hasn't already been released. If you have not received any of your loan, you will get both installments.

**Where to Send this Form****If you're going to a school in Ontario:**

Send your completed and signed form to your school's Financial Aid Office.

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

Send your completed and signed form to: Student Financial Assistance Branch, Ministry of Advanced Education and Skills Development, PO Box 4500, 189 Red River Road, 4th Floor, Thunder Bay, ON P7B 6G9.

**Questions?****If you're going to a school in Ontario:**

Contact the financial aid office at your school.

**If you're going to a school outside Ontario:**

Contact the ministry at: Student Financial Assistance Branch, Ministry of Advanced Education and Skills Development, PO Box 4500, 189 Red River Road, 4th Floor, Thunder Bay, ON P7B 6G9.

General inquiry telephone service is available Monday to Friday, 8:30 AM – 4:30 PM (Eastern Time)

Telephone: 1-807-343-7260.

Toll-free in North America: 1-877-OSAP-411 (1-877-672-7411)

Telephone Device for the Deaf (TDD): 1-800-465-3958

**Section A: Student's Information**

**Social Insurance Number:**

**Ontario Education Number (OEN), if assigned :**

**Last name:**

**First name:**

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**Student's Mailing Address**

**Street number and name, rural route, or post office box:**

**Apartment:**

**Street number and name, rural route, or post office box:**

**Province or state:**

**City, town, or post office:**

**Postal code or zip code:**

**Country:**

**Area code and telephone number:**

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**Information about Student's School and Program**

**What is the name of the school you are currently attending for your 2016-2017 study period?**

**Student number at your school:**

**What is the name of your program (e.g., Business Accounting, Chemical Engineering)?**

**What are the start and end dates of your 2016-2017 study period?**

**From:**

Month      Year

**To:**

Month      Year

### Section B: Student Declaration

I am requesting to receive only grant funding for which I am eligible and declining any Canada-Ontario Integrated Student Loan, which I have not yet received for the study period indicated above. I understand that after submitting this form, I may not be eligible to reverse this request. I will be bound by the Declarations I signed on my **2016-2017 OSAP Application for Full-Time Students**.

**Signature of Student:**

**Date:**

Month	Day	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

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 Training Colleges and Universities 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 Training Colleges and Universities, PO Box 4500, 189 Red River Road, Thunder Bay, ON P7B 6G9; (807) 343-7260.

### Office Use Only Section

**Date entered:**

Month	Day	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Signature of financial aid office staff:**

**Staff name:**