



## Student Financial Profile - Graduate Fall/Winter 2016-2017

### 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 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: Manager, Student Client Services, W120 Bennett Centre for Student Services, York University, 4700 Keele Street, Toronto ON, M3J 1P3, 416-872-9675.

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### Application Deadline: January 15, 2017

The Student Financial Profile is a multi-purpose application form that is used to apply for scholarships, awards and bursaries. You should complete the SFP at the start of each academic session.

### Who Can Submit the SFP:

- Current undergraduate students (excluding JD students in Osgoode)
- Current graduate students (excluding MBA, MPA, IMBA, MBAN and MACC students in Schulich)
- International students - only in order to be considered for funding programs provided by York International.

### You may submit your Profile to the following address:

Faculty of Graduate Studies  
283 York Lanes

### 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
- Scholarships and Awards

Personal Information				
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms <input type="checkbox"/> Miss		Student Number:		Social Insurance Number:
Surname:		First Name:		
E-mail:				
1. I am a Canadian Citizen, permanent resident OR protected person		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
2. I am single with no dependants and have been out of high school for less than four years		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3. I am married or in a common law relationship with no dependants		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
4. I am married or in a common law relationship with dependants		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If you answered <b>yes</b> to either Question #3 or #4, please answer the following questions:				
i) Please indicate the name of your partner				
ii) Is your partner earning an income?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If <b>yes</b> , what is your partner's gross annual income for the current calendar year (January to December)?				
iii) Is your partner a full-time student?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
iv) Is your partner receiving OSAP or any other government assisted student loan?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>If Applicable:</b> v) Please indicate the number of dependent child(ren) and their ages				
Childcare Expenses for the 2016 - 2017 academic session				
5. I am a sole-support parent		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If <b>yes</b> , please indicate the number of dependent child(ren) and their ages				
Childcare Expenses for the 2016 - 2017 academic session				
6. I am a current Crown Ward who is not adopted or both my parents are deceased		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
7. I am single with no dependants and have been out of high school for four or more years		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
8. Where will you be residing during the Fall/Winter 2016 - 2017 academic session?	<input type="checkbox"/> With Parent(s), family or friends not paying rent	<input type="checkbox"/> Living in on-campus residence	<input type="checkbox"/> Living on/off campus paying rent	<input type="checkbox"/> With Parent(s), family or friends paying rent

### Additional Personal Information (Optional)

From time to time, York University receives additional funding for students who meet specific criteria. Your responses to the statements below are optional and will help York University to determine your eligibility for additional funding it may receive.

1. I have a permanent disability, as defined by the Ontario Human Right Code.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
2. I am the first generation in my family to participate in postsecondary studies and declare that my parents did not attend postsecondary studies in or outside of Canada, at any time or in any program.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3. I am a member of a visible minority.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
4. I have been actively involved in one of the following communities? Please check off the ones that apply and provide more details in the Extracurricular Activities and Personal Statement sections.	<input type="checkbox"/> African/Caribbean <input type="checkbox"/> Barbadian <input type="checkbox"/> Greek <input type="checkbox"/> Italian <input type="checkbox"/> Korean <input type="checkbox"/> Macedonian <input type="checkbox"/> Nigerian <input type="checkbox"/> Sikh <input type="checkbox"/> Spanish		
4. 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	
If you answered <b>yes</b> to the above question, please specify your aboriginal affiliation/organization.	<input type="checkbox"/> Indian/First Nation	<input type="checkbox"/> Inuit	<input type="checkbox"/> Métis

### Ontario Residency

Which **ONE** statement best describes your current residency?

<input type="checkbox"/>	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.
<input type="checkbox"/>	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.)
<input type="checkbox"/>	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.
<input type="checkbox"/>	I am from another Canadian province or territory.
<input type="checkbox"/>	I am an international student.
<input type="checkbox"/>	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.

## Government Student Assistance

1. Have you already applied for the Ontario Student Assistance Program (OSAP) for the Fall/Winter 2016 - 2017 session?

Yes

No

If **yes**, please skip the "Financial Resources" section and proceed to "Reason for Bursary Application".

2. Have you applied for the government student assistance program in your home province/territory?

Yes

No

If you answered **yes** to the above question, please specify your province or territory. Please attach a copy of your Notice of Assessment, which confirms the total amount of assistance you are entitled to receive for the Fall/Winter 2016 - 2017 session, to the back of this form. Please skip the "Financial Resources" section and proceed to "Reason for Bursary Application".

If you answered **no**, please explain why, and how you will be funding your studies:

## Financial Resources

Please only include your resources for the period of time that you are attending Fall/Winter 2016 - 2017 classes.

Savings Prior to the Start of the Fall/Winter 2016 - 2017 academic session

Spousal Contribution

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)

Your monthly income from paid work

\$ \_\_\_\_\_ x \_\_\_\_\_ months

Monthly income from Teaching, Research or Graduate Assistantship

\$ \_\_\_\_\_ x \_\_\_\_\_ months

Your monthly income from government benefits (i.e. EI, Ontario Works, Indian Affairs, VRS, CPP, etc.)

\$ \_\_\_\_\_ x \_\_\_\_\_ months

Please specify government benefits that you receive

Non-Ontario Government Student Assistance

Please specify any external awards you will be receiving (name and amount)

Student Line of Credit from a bank/bank loan for study purposes:

Total amount of line of credit:

Amount to be used for this study session:

Amount of Line of Credit still available:

Name of Bank:	
Other Resources 1 (provide the total amount for the Fall/Winter 2016 - 2017 session)	
Please specify Other Resources 1	
Other Resources 2 (provide the total amount for the Fall/Winter 2016 - 2017 session)	
Please specify Other Resources 2	
Other Resources 3 (provide the total amount for the Fall/Winter 2016 - 2017 session)	
Please specify Other Resources 3	

### Reason for Bursary Application

Please explain why you are applying for financial assistance. **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.

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### Extracurricular Activities

Please list any recent extracurricular activities that you have been involved with on or off-campus – as they pertain to the award(s) that you are applying for. Examples of extra-curricular activities would be membership on a student club or being involved in a hiking group.

Activity/Organization	Position	Number of Months	Hours Per Week

**Community/Volunteer Service**

Please list any recent community service that you have been involved with on or off-campus – as they pertain to the award(s) that you are applying for. Examples of community and volunteer activities would be volunteering at the Canadian Cancer Society or a senior's home.

Organization	Position	Number of Months	Hours Per Week
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**Personal Statement**

If you would like to be considered for an award with specific requirements, be sure to highlight how you meet the requirements here (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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**ALL STUDENT FINANCIAL PROFILES MUST HAVE AN ORIGINAL SIGNATURE.  
Faxed copies/photocopies or e-mail attachments will not be accepted.**

OFFICE USE ONLY		
Initials	Date:	Bursary Amount:
Comments:		