

Purpose

This form is needed to:

- Verify your eligibility for the Living and Learning Grant through your **2022-23 OSAP Application for Full-Time Students**;
- Determine whether parental information is required on your **2022-23 OSAP Application for Full-Time Students** or **2022-23 OSAP Application for Micro-credentials**; and,
- Determine whether a student contribution is required on your **2022-23 OSAP Application for Full-Time Students** or **2022-23 OSAP Application for Micro-credentials**.

How to complete this form

Fill out Section A and sign the consent. Forward Sections B, C and D to your Ontario Children's Aid Society (CAS). A CAS official will complete these sections and return the form to you.

You are responsible for submitting all sections of the completed form before the deadline using one of the options indicated below.

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 all sections of this completed form to your school's financial aid office.

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

Send all sections of this completed form 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

If you have submitted an OSAP Application for Full-Time Students, this form must be received by your financial aid office or the Ministry of Colleges and Universities (the ministry) no later than 40 days before the end of your 2022-23 study period.

If you have submitted an OSAP Application for Micro-credentials, this form must be received by your financial aid office no later than 5 days after the end of your 2022-23 study period.

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 of Ontario:

Contact the ministry at: Student Financial Assistance Branch, Ministry of Colleges and Universities, PO Box 4500, 189 Red River Road, 4th Floor, Thunder Bay, Ontario, P7B 6G9.

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

- Telephone: 807-343-7260.
- Toll-free in North America: 1-877-OSAP-411 or 1-877-672-7411
- TTY: 1-800-465-3958

Section A: Student's information

Student's personal information

Social Insurance Number:

Ontario Education Number (OEN), if assigned:

Last name:

First name:

Date of birth:

Day Month Year

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:

Information about student's school and program

What is the name of the school you plan to attend or are currently attending for your 2022-23 study period?

Student number at your school:

What are the start and end dates of your 2022-23 study period?

From:

To:

Day Month Year

Day Month Year

Declaration of student

I consent to the Ministry of Colleges and Universities collecting and exchanging personal information relevant to my eligibility for OSAP assistance with the Ontario Children's Aid Society.

Signature of student:

Date:

Day Month Year

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Your personal information will be used to administer and finance the Ontario Student Assistance Program (OSAP), including the Living and Learning Grant, as set out in the notice of Collection and Use of Personal Information on your application and in accordance with the consents you signed on your application. The Ministry of Colleges and Universities administers and finances OSAP under the legal authority set out on your application. If you have any questions about the collection, use and disclosure of your 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.

Section B: Client's status with the Ontario Children's Aid Society

Client information

Last name:

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First name:

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Date of birth:

Day Month Year

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Check the FIRST statement that applies to the client indicated above (see notes on next page):

- 21 years of age or older and previously received or was eligible to receive a Continued Care and Support for Youth allowance (formerly named Extended Care and Maintenance).
- Aged 18, 19, or 20 and currently receiving a Continued Care and Support for Youth allowance.
- Aged 18, 19, or 20 and eligible to receive a Continued Care and Support for Youth allowance, but not receiving the allowance.
- Under 18 years of age and currently in extended society care, or subject to a protection customary care agreement or a protection custody order, or receiving support under a Voluntary Youth Services Agreement.

Continued on the next page.

- Previously was a Crown ward or in extended society care then:
- Adopted on or after August 1, 2013 through a public adoption.
 - Other (e.g., adopted prior to August 1, 2013 through a public adoption, returned to birth family).
- None of the above apply.

Notes:

- A youth is placed in extended society care pursuant to a court order under the *Child, Youth and Family Services Act, 2017*.
 - Eligibility for Continued Care and Support for Youth includes youth aged 18, 19, and 20 who had extended society care status that expired at age 18; were subject to a protection (formal) customary care agreement or a protection custody order at age 18; or were receiving support under a Voluntary Youth Services Agreement at age 18. Funding provided by a Children's Aid Society to youth age 21 or older is not considered Continued Care and Support for Youth.
 - Public adoptions are adoptions of children in the permanent care of a Children's Aid Society or Child and Family Services Agency, formerly known as Crown wards. All public adoptions are carried out by a Children's Aid Society.
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Section C: Ontario Children's Aid Society information

Official at Children's Aid Society

First name:

Last name:

Title:

Area code and telephone number:

Extension:

Children's Aid Society office address

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

Province:

City, town, or post office:

Postal code:

Section D: Children's Aid Society official's declaration

I am designated by the Children's Aid Society to confirm the status of the client indicated and certify that the information is correct.

Signature of Children's Aid Society official:

Date:

Day Month Year