EMERGENCY STUDENT ASSISTANCE APPLICATION

Please complete all parts of this application package in full. Incomplete applications will not be processed.

- Resources available from this fund are limited.
- Loans do not normally exceed $800.
- You must have repaid all outstanding emergency aid from previous academic sessions.
- Consider carefully your ability to repay before you apply.
- Explain clearly why you require emergency assistance.
- You must be enrolled as a full-time student in the current academic session to which you are applying for.
- You must have obtained a passing grade on all courses taken in the previous academic session.
- You must list the name of two next of kin references.
- You must attach all supporting financial documentation (i.e., recent pay stub; notice of assessments; income tax refund; awards/bursaries/scholarship, etc) - clear photocopies accepted.
- Loans are due: December 1st for those issued in first term; March 31st for those issued in second term.
Emergency Assistance Application

All fields on this application are mandatory. Incomplete applications will not be processed

Personal Information
Student No.: _______________________________
Name: ____________________________________
City/Town: ________________________________
Province: _______ Postal Code: _____________
E-Mail: ________________________________
Address: ________________________________
Sessional Telephone No.: ___________________ 
Permanent Telephone No.: __________________
Faculty/Program: ___________ Year: ______
Name of Spouse/Significant Other: ____________
Names and Ages of Dependents: ________________

Next of Kin Reference
Name: ____________________________________ Relationship: _______________________________
Address: ________________________________ City/Town: ________________________________
Province: _______ Postal Code: _____________ Phone No.: ____________________________

Next of Kin Reference
Name: ____________________________________ Relationship: _______________________________
Address: ________________________________ City/Town: ________________________________
Province: _______ Postal Code: _____________ Phone No.: ____________________________

Amount of Emergency Assistant Requested: $ ___________________

Reasons for Request (Provide copies of applicable statements, bills, receipts, estimates, Notice of Assessment, recent pay stub, Income Tax Refund, etc)
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

How do you plan to repay these funds within the current academic session? ______________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

Please answer ALL of the following questions:
1. Did you apply through your home province for a student loan? __________
   If yes, you must provide a photocopy of your provincial need assessment and/or notice of assistance.
2. Do you own or lease a vehicle? ______
   List all cars and other vehicles that you or your spouse/significant other own or operate regularly.
____________________________________________________________________________________________
____________________________________________________________________________________________
CASH FLOW STATEMENT
Please provide income information for September 1st to April 30th. You may have to estimate some of the figures such as employment income and income tax.

<table>
<thead>
<tr>
<th>Description</th>
<th>Applicant</th>
<th>Spouse (If applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Student Loan (Including applicable grants/bursaries)</td>
<td>$_________</td>
<td>$_________</td>
</tr>
<tr>
<td>Other Awards (Bursaries, fellowships, assistantships)</td>
<td>$_________</td>
<td>$_________</td>
</tr>
<tr>
<td>Child Tax Benefit</td>
<td>$_________</td>
<td>$_________</td>
</tr>
<tr>
<td>Assets (Savings, bank accounts, bonds, stocks, RRSPs)</td>
<td>$_________</td>
<td>$_________</td>
</tr>
<tr>
<td>Other Income (Work earnings, investments, rental, Worker’s Comp, EI, etc.)</td>
<td>$_________</td>
<td>$_________</td>
</tr>
<tr>
<td>Contributions From Relatives (Excluding room &amp; board)</td>
<td>$_________</td>
<td>$_________</td>
</tr>
<tr>
<td>Income Tax Refund (Estimate)</td>
<td>$_________</td>
<td>$_________</td>
</tr>
</tbody>
</table>

TOTAL INCOME: September 1st to April 30th $_________ $_________

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Full Tuition: $______________ Books and Supplies (Both terms): $______________

EXPENSES FOR ONE MONTH

Please provide expense information that applies to you for a one-month period. You may need to estimate variable expenses such as groceries, laundry, clothing, entertainment, etc.

Rent/Mortgage: $______________
Personal Loans: $______________
Parking: $______________ Include parking at home and at school, if applicable
Utilities: $______________
Phone Bill: $______________ Include charges for land line and cell phone
Groceries: $______________
Vehicle Insurance: $______________
Gas: $______________ Include gas paid to carpools and/or friends/family
Credit Card(s): $______________
Laundry: $______________
Toiletries: $______________
Entertainment: $______________
Other: $______________
Emergency Assistance Application

MONTHLY CASH FLOW

A. Total Income for the Session: $__________________________

B. Net Resources for the Session: $__________________________
   = Total Income – Tuition, Books, and Supplies

C. Monthly Budgeted Amount: $__________________________
   = Line B ÷ the number of months in your current academic session

D. Total Expenses for One Month: $__________________________
   Add all expenses noted on the previous page

E. Budgeted surplus or deficit per month $__________________________
   Line C – Line D

TO BE COMPLETED BY THE APPLICANT UPON APPROVAL

I hereby apply for financial assistance from funds administered by the Financial Aid & Awards Office. I declare that all information given on this application is complete and true in every respect; that I shall be a full-time student for the academic period and course load stated; and the financial assistance is essential to enable me to continue my education. Furthermore, I am aware that the use of this loan for any purpose other than those specified in this application without the written permission of the Director of Financial Aid and Awards will constitute a violation of this agreement, making the loan immediately due in full and making me ineligible for other support or assistance from the University of Manitoba until the loan is repaid. I am aware that this interest free loan is not to be used to pay for tuition costs. I understand that if payment is not made in full by the promised date, or if further arrangements are not made with the Awards Office, a Hold will be placed on my file and my outstanding loan will be turned over to a collection agency for recovery (a Hold placed on a student's file has the effect of cutting off all services from the university; no mark statements, transcripts or letters or permissions are issued, no further registrations are accepted, no library services are approved). I hereby consent to full access of my student records. I will notify the Financial Aid & Awards Office of any change in academic status or in my financial status (or that of my spouse or dependants) during the academic period covered by this application.

Applicant’s Signature: ___________________________ Date: _______________

Loan Approved: ☐ Yes ☐ No Loan Amount: $___________

Director, Financial Aid & Awards Signature: ___________________________ Date: _______________

NOTES:__________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________