

Program Cost Form (Part-time)

Canada-Newfoundland and Labrador Integrated Student Financial Assistance Program

This form is required for all **part-time** students.

Guidelines and instructions for completing this form are located on the second page

A. Student's Personal Information

Student's First Name	Student's Last Name	Student's Social Insurance Number (SIN) XXX-XXX-
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B. Program Information

What is the name of the post-secondary institution you plan to attend?	What campus, college or city of this institution will you be attending?	What is your program of study?
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I hereby request financial assistance for the following course(s):

Course Description	Course Code	Type of Instruction (i.e., in-class/correspondence/tele-course/distance learning)	Start Date (YYYY-MM-DD)	End Date (YYYY-MM-DD)
Example: Literature and Composition	ENGL 1000	Correspondence course	2023-09-06	2023-12-16

C. To be Completed by the Educational Institution

Complete Section C below and verify that all information provided in Section B, above, is complete and correct.

Period of Study Start Date (YYYY-MM-DD)	Period of Study End Date (YYYY-MM-DD)	What are the applicant's tuition and compulsory fees (do not include residence fees) for the period of study?	What are the applicant's book and equipment costs for the period of study?
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What is the applicant's percentage of a full course load?	Number of Weeks of Study	Number of Courses per Week	What is the level of the applicant's program? <input type="checkbox"/> Certificate <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Diploma <input type="checkbox"/> Master's Degree <input type="checkbox"/> Doctoral Degree
What faculty / division is the program considered to be in? <input type="checkbox"/> Administration/Business <input type="checkbox"/> Law <input type="checkbox"/> Theology <input type="checkbox"/> Health Sciences <input type="checkbox"/> Trades <input type="checkbox"/> Education <input type="checkbox"/> Community Service <input type="checkbox"/> Arts / Sciences <input type="checkbox"/> Medicine <input type="checkbox"/> Dentistry <input type="checkbox"/> Agriculture / Related Sciences <input type="checkbox"/> Other (specify)			
Program of Study			
I certify that the above information in Section C of this form is correct based on the information provided by the applicant in Section B.			
Name of Authorized Officer of the Educational Institution		Title	Telephone Number
Address of Educational Institution			Educational Institution Code
Email Address of Educational Institution	Authorized Officer's Signature		Date (YYYY-MM-DD)

Collection and Use of Information:

This personal information is collected under the authority of the **Canada Student Loans Act, Canada Student Financial Assistance Act**, and the **Student Financial Assistance Act, 2019** (Newfoundland and Labrador) as amended from time to time and will be used to determine and verify eligibility under the federal and provincial student financial assistance programs. For any questions about the collection and use of this information, contact the Director, Student Financial Services Division, Department of Education, Government of Newfoundland and Labrador, P.O. Box 8700, St. John's, NL, A1B 4J6 or (709) 729-5849.

Submit completed form by email to studentaidmailbox@gov.nl.ca, fax to 709-729-2298, or mail to Student Financial Services Division, Department of Education, P.O. Box 8700, St. John's, NL A1B 4J6

General Information:

The purpose of the **Program Cost Form** is to provide StudentAidNL with the necessary program and cost information to assess an application for student financial assistance for part-time study under the Canada Student Financial Assistance Program.

Instructions for the Educational Institution:

- If not already completed by the student, please provide the full name, the last 3 digits of Social Insurance Number and program information of the student for whom this Program Cost Form is being completed.
- Indicate the percentage of full-course load the student is enrolled (i.e., if five courses are considered 100%, **two courses would be considered 40%**) and the actual cost of tuition, compulsory fees, books and equipment for the period of study.
- Computer costs should not be included.
- See below for definitions.

Guidelines for Semester Length:

- The program must be at least 12 weeks in duration. Funding periods should align with the natural breaks during the academic year.
- No semester can extend beyond July 31 for a period greater than 5 weeks.
- Do not include generic start and end dates for a semester on the Program Cost Form if they do not apply to the student applying. The dates given should be specific for the student whose name appears on the form (i.e., if the program/semester normally starts in September but the student does not start until November then the Program Cost Form should have a start date of November and not September).

Terms Defined

Part-time Students: registered for between 20-59% of a full course load. (Students with a disability can select full-time or part-time status if registered between 40-59%)

Tuition: The actual cost of tuition, based on the actual amount made payable to the educational institution.

Book/Equipment Costs: Can consist of, but not limited to, items such as notebooks, paper, pens, pencils, typing and photocopy services and other similar supplies required to complete the program of study. The specific books and equipment required may vary from one program to another.

Compulsory Fees (can include):

- Annual admission fees required when submitting applications
- Student council fees
- Student services fees
- Field trip costs
- Examinations fees
- Graduate thesis costs
- Other amounts payable by students to the educational institution which are required for their course of study
- Membership fees for professional or other societies