



SCHEDULE C
PARENT/LEGAL GUARDIAN INFORMATION
CSFA LOAN AND/OR GRANTS APPLICATIONS

Applicant's (student's) name: _____

Is Yukon the most recent province or territory in which you, the parent or guardian of the applicant, have lived and maintained a family home for at least 12 consecutive months? Yes No

Parent/guardian A
 SIN: _____ Last name: _____ First name: _____
 Physical address: _____
 City: _____ Prov/terr: _____
 Postal code: _____ Telephone: _____
 Relationship to applicant: _____ (e.g. mother, father, legal guardian, etc.)
 Provide a copy of your most recent Income Tax Summary or Revenue Canada Tax Assessment:
 Attached On its way

Parent/guardian B – Refers to a person married to or living with, for a period of twelve months or longer at the date of this application, the person listed as parent/guardian A.
 SIN: _____ Last name: _____ First name: _____
 Relationship to applicant: _____ (e.g. mother, father, legal guardian, etc.)
 Provide a copy of your most recent Income Tax Summary or Revenue Canada Tax Assessment:
 Attached On its way

Dependent children

A dependent child (including an adopted child, step-child or foster child) is defined as a child who is in full-time studies at a post-secondary institution and meets the definition of a Dependent Student found at <https://yukon.ca/en/full-time-student-loan-grant>, or who is 17 years or younger and is wholly dependent on you or your spouse for support, and over whom you or your spouse has, in law or in fact, custody and control. If more than 3 dependants attach another sheet.

Applicant and other dependant(s) (last name, first name)	Date of birth	Relationship to you	Resides with you?		Shared custody?		Attending full-time post-secondary?	
			Yes	No	Yes	No	Yes	No
_____	YYYY/MM/DD	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	YYYY/MM/DD	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	YYYY/MM/DD	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I/We declare that the information that I/we provided on this form is correct to the best of my/our knowledge. I/We make this declaration knowing that it is an offence under the *Canada Student Loans Act*, the *Canada Student Financial Assistance Act* and the *Canada Student Financial Assistance Regulations* to knowingly make any false statements or misrepresentation in an application or other documents, or to willfully furnish false or misleading information.

I/We declare that the designated authority for the Yukon Territory has my/our authorization to obtain, as required, any information relating to the information provided above, and hereby consent to the release of information in support of this application.

I agree that information pertaining to this application may be shared with other funding agencies.

I/We also understand that signing this form verifies that the information provided is accurate and that I am/we are not co-signing a loan on behalf of the applicant.

Signature of parent/guardian A: _____ Date: YYYY/MM/DD

Signature of parent/guardian B: _____ Date: YYYY/MM/DD

We are collecting this personal information to determine and verify the applicant's eligibility for financial assistance in accordance with the *Student Financial Assistance Act (Yukon)*, the *Canada Student Loans Act*, the *Canada Student Financial Assistance Act* and the *Canada Student Financial Assistance Regulations*. The collection, use and disclosure of your personal information is carried out under the authority of Yukon's Access to Information and Protection of Privacy (ATIPP) Act and is managed in accordance with the ATIPP Act. If you have any questions about the collection of this information, please contact the Student Financial Assistance Office at 867-667-5929.