



Student Financial Aid Program
APPLICATION FORM AND BUDGET

Student: _____ Social Insurance No.: _____
For academic year Sept. _____ to April _____ Date of Application: _____
Enroled in: _____ credit hours Fall semester; _____ credit hours Winter semester
Year of studies: _____ year of a _____ year program

(Note: If you are married, include total family revenues, expenses, assets and liabilities below.)

Table with 3 columns: Source of Funds, Fall Semester, Winter Semester. Rows include Savings, Part time employment, Spouse's employment, Parents/other, Scholarships/grants, Student loans, TOTAL AVAILABLE: (A), Expenses (Tuition and fees, Books, Housing, Board/Food, Loan Payments, Transportation, Personal items, Other), TOTAL EXPENSES: (B), and Unmet need calculation.

Assets you own

Vehicles: (car, bike, etc.) \$ _____
 GIC's, term deposits etc. \$ _____
 RRSP's \$ _____
 Other _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____

Total: \$ _____

Liabilities you owe

To other colleges: \$ _____
 Student loans from
 previous years: \$ _____
 Loan for cars etc: \$ _____
 Other _____ \$ _____
 _____ \$ _____
 _____ \$ _____

Total: \$ _____

Will you be working while you study: no _____ Part-time _____ Full-time _____

Is there any additional information that should be considered by the Committee?

For office use only:

Date	Amount	Signature of Recipient
_____	_____	_____
_____	_____	_____

My signature indicates that I agree that if I withdraw or am expelled from RMC before the end of the current semester, I will repay any grants received in this semester, pro-rated from the date of withdrawal/expulsion to the end of the semester.