University Registrar‘s Office, Financial Aid and Awards 172 St. George Street Toronto, Ontario M5R 0A3 (416) 978-2190

Print Form

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# Scholars and Students at Risk Award Program | PLEASE COMPLETE IN FULL

## Personal Information

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Marital Status | Single | Other |  | Status in Canada | Canadian Citizen Permanent Resident | | Student Authorization Other |
|  | Married |  |  |
| Number of dependent children living with you | | | | Ages of dependent children living with you | | | |
| Last Name/Surname | | | | First Name/Given Name | | | |
| Faculty/College | | | Student Number | | Year of Study | Credits in current academic year | |
| Expected Date of Graduation (mm/yyyy) | | | Program/Area of Study | |  | | |

**Full Mailing Address**

|  |  |  |
| --- | --- | --- |
| Street Name and Number | | Apt # |
| City | Province | Telephone |
| Country | Postal Code |  |
| E-mail Address: | | |

## Additional information

* Attach a letter describing your status as either an asylum seeker or refugee or how your proposed program of study has been impacted by changing political environments in your country of current or future study, including changes in immigration law. Please include your date or estimated date of entry into Canada, and any financial challenges you face in pursing your academic goals.
* Submit a letter of support from an individual who is in support of your application (optional). This letter should also indicate if you are being sponsored and details of the sponsorship (if applicable).

**Declaration**

I hereby certify that the information provided on this application is, to the best of my knowledge, true and complete, and I authorize the release of the information contained herein to the appropriate Grant Selection Committee.

Some grants are funded by private donors who wish to receive limited information about the recipient(s). This could be general, biographical and/or academic in nature.

Do you agree to the release of such information?  Yes  No

The University of Toronto respects your privacy. The information on this form is collected pursuant to section 2(14) of the University of Toronto Act, 1971. It is collected for the purpose of administering admission, registration, academic programs, university-related student activities, activities of student societies, financial assistance and awards, graduation and university advancement, and for the purpose of statistical reporting to government agencies. At all times it will be protected in Accordance with the Freedom of Information and Protection of Privacy Act. If you have questions, please refer to [www.utoronto.ca/privacy](http://www.utoronto.ca/privacy) or contact the University's Freedom of Information and Protection of Privacy Office at 416 946-5835, Room 201, McMurrich Bldg., 12 Queen's Park Crescent, Toronto, ON, M5S 1A1

Signature Date (dd/mm/yyyy)