



University  
of Manitoba

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## EMERGENCY STUDENT ASSISTANCE APPLICATION

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

### Note:

- Usually, loans do not exceed \$1000, as funds are limited.
- Consider carefully your ability to repay before you apply.

### Pre-screening Criteria:

- You must have **paid all tuition owing** for both the current and from previous academic sessions.
- You must have **repaid all outstanding emergency aid** from previous academic sessions.
- You must be a **full-time** student in the **current academic session**.
- You must have achieved the **minimum passing grade** on all courses taken in the **previous academic session**.

### Required Supporting Documentation:

The following documents, when applicable, need to be included in your application package. Only clear scans/photocopies are acceptable. **Check list:**

- Recent pay stub;
- Government Student Aid Notice of Assessment/Assistance;
- Canada Revenue Agency (CRA) Notice of Assessment;
- Awards external to the University (bursaries, scholarships, etc.), only clear scans/photocopies accepted.

### How to Complete This Form:

This form performs some calculations and therefore must be completed using the free Adobe Acrobat Reader. Please fill out the form and email it, along with your supporting documents, to [awards@umanitoba.ca](mailto:awards@umanitoba.ca) to be reviewed by an Awards Officer. Upon approval, you will be required to sign both this Application and a Promissory Note.

### Notice Regarding Collection, Use, and Disclosure of Personal Information by the University

Your personal information is being collected under the authority of The University of Manitoba Act. The information you provide will be used by the University for the purpose of determining eligibility for the Emergency Loan, for administering the loan, and for communication. Your personal information will not be used or disclosed for other purposes, unless permitted by The Freedom of Information and Protection of Privacy Act (FIPPA). If you have any questions about the collection of your personal information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.



# Emergency Assistance Application

FINANCIAL AID & AWARDS | 422 University Centre | Winnipeg, Manitoba, Canada R3T 2N2 | Phone: 204-474-8197 | [umanitoba.ca/student/fin\\_awards](http://umanitoba.ca/student/fin_awards)

## Select the current term:

## Personal Information

Name (Last, First)	/	Student Number	Year in Program
Street Address		Faculty	
City/Town		Program	
Province	Postal Code	Name of Spouse/Significant Other/Partner:	
Sessional Phone No.:		Names and Ages of Dependents:	
Permanent Phone No.:			
U of M email			

## Next of Kin Reference 1 (two references are required)

Name (Last, First)	/	Relationship	
Street Address		City/Town	
Province/State	Country	Postal Code	Phone Number

## Next of Kin Reference 2

Name (Last, First)	/	Relationship	
Street Address		City/Town	
Province/State	Country	Postal Code	Phone Number

## Reasons for Request

Provide copies of applicable statements, bills, receipts, estimates, Notice of Assessment, recent pay stub, Income Tax Refund, etc


## Repayment of Emergency Assistance Funds

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


# Emergency Assistance Application

## Cash Flow Statement

Please provide income information from the

You may have to estimate some of the figures such as employment income and income tax.

	Applicant	Spouse (if applicable)
Total Student Aid (government student loans and grants)	\$	\$
Other Awards (bursaries, scholarships and prizes)	\$	\$
Child Tax Benefit and/or Family Allowance	\$	\$
Assets (cash savings, bank accounts, bonds, stocks, RRSPs)	\$	\$
Other Income (Work earnings, investments, rental, Worker's Comp, EI, etc.)	\$	\$
Contributions From Relatives (Excluding room & board)	\$	\$
Sponsor (monthly funding amount) \$                      x                      (Months of Study [Item 2 below]) =	\$	----
Income Tax Refund (Estimate)	\$	\$
(Sum of all amounts above, Applicant & Spouse) <b>Total Income for the Session [1]</b>		\$

## Academic Expenses

Student Aid - through your home province, did you apply for student aid this year?      **Yes**      **No**

Length of Your Academic Session in Number of Months [2]:	Full Tuition	\$
	Books & Supplies	\$
<b>Total Academic Expenses [3]</b>		\$

## 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.

Do you own/lease a vehicle?		Yes	No	
Rent/Mortgage	\$		Entertainment	\$
Utilities	\$		Vehicle Fuel Costs	\$
Phone Bill	\$		Vehicle Insurance	\$
Groceries	\$		Parking	\$
Laundry	\$		Credit Card(s)	\$
Toiletries	\$		Personal Loans	\$
Other (enter a description):				\$
Total Monthly Expenses [4]				\$

**Amount of Emergency Assistance Requested**      **\$**

# Emergency Assistance Application

FINANCIAL AID AND AWARDS - OFFICE USE ONLY

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

## Monthly Cash Flow Summary

<b>Total Income for the Session</b> [Item 1, Pg 2]	\$
<b>Net Resources for the Session</b> = Total Income – Total Academic Expenses [Item 3, Pg 2]	\$
<b>Monthly Budgeted Amount</b> = Net Resources ÷ Length of Academic Session [Item 2, Pg 2]	\$
<b>Total Monthly Expenses</b> [Item 4, Pg 2]	\$
<b>Budgeted surplus or deficit per month</b> = Monthly Budget Amount – Monthly Expenses	\$

## 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 of permissions are issued, no further registrations are accepted, no library services are approved). I hereby consent to full access to 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 dependents) during the academic period covered by this application.

Loan Approved:	Yes	No	Loan Amount	\$	Due Date
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\_\_\_\_\_  
Director's Signature (or Designate)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date (YYYY-MM-DD)

\_\_\_\_\_  
Date (YYYY-MM-DD)

Notes: