

Student Signature

FINANCIAL AID OFFICE ST. CLAIR COLLEGE

BOX 12 2000 Talbot Rd. West Windsor, ON N9A 6S4

OSAP FEE REDIRECTION AUTHORIZATION CHANGE FORM *To be completed by the student (please print):* LAST NAME: _____ FIRST NAME: _____ SOCIAL INSURANCE #: STUDENT #: Please select which changes are relevant to this request: () AUTHORIZATION CHANGE REQUEST FROM "AGREE TO REMIT" TO "DO NOT **AGREE TO REMIT"** I have submitted my OSAP application for the current academic year and have authorized the OSAP program to redirect my OSAP funds to St. Clair College in order to pay my outstanding fees. I now wish to revoke this authorization and would like the OSAP program to direct my OSAP funding to my bank account directly. I understand that, by revoking this authorization, I will be responsible for paying my outstanding fees to St. Clair College by the posted deadline. I further understand that, should my fees not be paid at the time that St. Clair College is required to confirm my enrolment with the OSAP program (in order that OSAP funds can be directed to my bank account), that St. Clair College will not be in a position to confirm my enrolment as my fees remain unpaid. I understand that this change may take up to 2 weeks to process from the date it is submitted to the Financial Aid Office and may not be processed in time before my enrolment is confirmed. Should this occur, this authorization will be applied to all future disbursements. Student Signature Date ○ AUTHORIZATION <u>CHANGE</u> REQUEST FROM "DO NOT AGREE TO SUBMIT" TO "AGREE TO SUBMIT" I have submitted my OSAP application for the current academic year and did NOT authorize the OSAP program to redirect my OSAP funds to St. Clair College in order to pay my outstanding fees. I now wish to CHANGE this authorization and would like the OSAP program to redirect my OSAP funding to St. Clair College to pay my outstanding fees. I understand this this change may take up to 2 weeks to process from the date it is submitted to the Financial Aid Office.

St.Clair College is committed to the protection of privacy and confidentiality of all its constituents. The information is collected for the purposes of administering the Ontario Student Assistance Program (OSAP) on behalf of the Ministry of Training, Colleges & Universities and any other need-based financial assistance as administered by St.Clair College. If you have any questions about the collection of information or the uses to which it will be put, please direct your questions to the Registrar, St. Clair College of Applied Arts & Technology. The Ministry administers OSAP under the authority of the Ministry of Training, Colleges and Universities Act, R.S.O. 1990, c. M.19, as amended, R.R.O. 1990, Reg. 773, Reg. 774, and Reg. 775, as amended, and O. Reg. 268/01, as amended; the Financial Administration Act,R.S.O. 1990, c. F. 12, as amended; the Canada Student Financial Assistance Act, S.C. 1994, c. 28, as amended; the Canada Student Financial Assistance Regulations, SOR 95-329, as amended; and the Budget Implementation Act, 1998, S.C. 1998, c. 21, as amended. If you have any questions about the collection or use of this information, contact the Director, Student Support Branch, Ministry of Training, Colleges and Universities, PO Box 4500, 189 Red River Road, 4th Floor, Thunder Bay, ON P7B 6G9.

Date