

COLLEGE STUDENT EMPLOYMENT PROGRAM (CSEP) BUDGET

Name of Student _____ SIN No. _____ Student No. _____

Address _____
 _____ City Province Postal Code

Marital Status Single Sole Support Parent Married Student

Note: Please calculate your budget for the study period... from September to April=8 months in school (ie: Telephone \$60 X 8 months = \$480 for one academic year). Your application will NOT be processed if your budget is incorrect. Due to volume, Financial Aid Staff cannot re-do your budget.

Financial Information for College Year

<u>Resources/Income</u>		<u>Educational/Living Expenses</u>	
Savings at Beginning of School Year	\$ _____	Tuition Fees for year	\$ _____
Parent's Assistance	\$ _____	Books/Supplies	\$ _____
Spouse's Assistance	\$ _____	Rent/Mortgage/ Residence Fees	\$ _____ X _____ mths= \$ _____
Bursaries/Scholarships	\$ _____	Hydro	\$ _____ X _____ mths= \$ _____
Part-time Income	\$ _____ X _____ mths = \$ _____	Gas	\$ _____ X _____ mths= \$ _____
Orphan's Benefits	\$ _____ X _____ mths = \$ _____	Water	\$ _____ X _____ mths= \$ _____
Ontario Works	\$ _____ X _____ mths = \$ _____	Cable	\$ _____ X _____ mths= \$ _____
Child Tax Benefit	\$ _____ X _____ mths = \$ _____	Telephone	\$ _____ X _____ mths= \$ _____
Employment Insurance	\$ _____ X _____ mths = \$ _____	Food	\$ _____ X _____ mths= \$ _____
C.P.P.	\$ _____ X _____ mths = \$ _____	Personal	\$ _____ X _____ mths= \$ _____
Ontario Disability Support Plan	\$ _____ X _____ mths = \$ _____	Clothing	\$ _____ X _____ mths= \$ _____
Government Student Loan (i.e. OSAP)	\$ _____	Travel: Local	\$ _____ X _____ mths= \$ _____
Assets you plan to/or have liquidated	\$ _____ X _____ mths = \$ _____	Travel: Parental Home	\$ _____ X _____ mths= \$ _____
Support Payments	\$ _____ X _____ mths = \$ _____	Laundry	\$ _____ X _____ mths= \$ _____
Student Line of Credit (Bank)	\$ _____	Entertainment	\$ _____ X _____ mths= \$ _____
Private Bank Loan	\$ _____	Car Maintenance	\$ _____ X _____ mths= \$ _____
Monetary Gifts	\$ _____ X _____ mths = \$ _____	Car/Home Insurance	\$ _____ X _____ mths= \$ _____
Spouses' Monthly Income	\$ _____ X _____ mths = \$ _____	Child Care (babysitting)	\$ _____ X _____ mths= \$ _____
Other	\$ _____ X _____ mths = \$ _____	Payments (Line of Credit)	\$ _____ X _____ mths= \$ _____
		Payments (Bank Loan)	\$ _____ X _____ mths= \$ _____
		Other	\$ _____ X _____ mths= \$ _____
TOTAL RESOURCES	\$ _____	TOTAL EXPENSES	\$ _____

Deficit/Surplus \$

_____ Total Resources – Total Expenses = Your Financial Need

To formalize compliance with the Freedom of Information and Protection of Privacy Act, Algonquin College requires that you read the statement below. The information gathered through this document is collected under the legal authorization of the Ontario Colleges of Applied Arts and Technology Act, 2002, S.O. 2002, Chapter 8, Schedule F, Section 6. The information is used for educational, administrative and statistical purposes of the College and/or ministries and agencies of the Government of Ontario and the Government of Canada. Administrative purposes may include the disclosure to or on behalf of the Students' Association of Algonquin College for the purposes of the activities of the Association or to establish qualifications for benefits such as drug plan cards, OC Transpo passes or Alumni Association. The College publishes the names of students who graduate and/or achieve academic excellence. For questions related to this policy, please contact the Registrar, 1385 Woodroffe Avenue, Ottawa, ON, K2G 1V8 or (613) 727-4723. Under the Privacy Act, individuals can request access to their own, individual information held on federal banks, including those held by Statistics Canada. Students who do not wish to have their information used may ask Statistics Canada to remove their identification and contact information from the national database. Further information on the use of this information can be obtained from Statistics Canada's website: <http://www.statcan.ca> or by writing to the Postsecondary Section of Statistics Canada, Centre for Education Statistics, 17th Floor, R.H. Coates Building, Tunney's Pasture, Ottawa, K1A 0T6.

I certify that the information provided on this application and financial statement is, to the best of my knowledge, true and complete. I authorize the Financial Aid Office to release to the Students' Association confirmation of financial need for CSEP purposes. If you are an Ontario Student Loan Program (OSAP) recipient, do NOT report CSEP income on your OSAP application. The Financial Aid Office will do this on your behalf.

Signature: _____ Date: _____

To be completed by the Hiring Department:

Name of Department: _____ Name of Program: _____

Name: (please print) _____ Extension: _____

Department Signature: _____ Date: _____

PLEASE BRING COMPLETED CSEP BUDGET FORM TO THE FINANCIAL AID OFFICE, ROOM C225

FAO Bursary Administrator

Approved Denied

Comments:

08/2007