ScotiaLine® personal line of credit for students



| You and | d the school Re | gistrar mus | t complete | this proof of er | nrolment | form for you | ır visit to | the Branch. | | |
|---|--|--------------------------------|-------------|-----------------------------------|----------|---------------|-------------|-------------------------|-----------------------------------|--|
| PROOF | OF ENROLM | ENT | · | · | | - | | | | |
| ScotiaLine personal line of credit account number: Branch Transit # Student ID Address of School Which year of your program are you in? | | | | | | | | | | |
| Personal Information | | | | | | | | | | |
| Title First Name | | Last Name | | | | Date of Birth | | Social Insurance Number | | |
| Street No. St | | Street Na | Street Name | | Unit # | | | | | |
| City | | Province | | Postal Code | | | | | | |
| | | | | | | | | | | |
| School | Information | | | | | | | | | |
| Name of College or University | | | | | | | | | | |
| Program / Faculty | | | - | | | | | | | |
| You will be attending school | | | | O Full-Time O Part-Time | | | | | | |
| How many years is your program? | | | 1? | | | | | | | |
| This for Please | to the Registra m confirms to u verify that this s pest of your kno | is that the a student is ci | bove stude | nt is attending | your ins | stitution. | | | on in any way. ion given above | |
| Study Start Date Stu | | | | y End Date | | | | | | |
| Date Signature of Registrar's / Fees Office | | | | | | il | Title | | | |
| | l Stamp of Reg alid without sch | | | f Enrollment ca s to the Study | | | than 1 r | nonth | | |