

Ministry of Training, Colleges and Universities Student Financial Assistance Branch PO Box 4500 Thunder Bay, ON P7B 6G9

Request for OSAP Access Number (OAN)

Section 1 - Personal In	formation (to be completed by the stude	nt)
Social Insurance Number:		
First name:	Last name:	
Student's mailing address:	Street, rural route, or post office:	Apt:
	City, town, or post office:	Prov/State:
	Postal/Zip code:	Area code and telephone number:
2 and 3 must be completed in		derstand that in order for my request to be considered, Sections cupations listed. I must also provide photocopies of the when sending it to the ministry for processing.
Student's signature:		Date:
Section 2 - Confirmatio	n of Student's Identity (to be completed	by authorized third party)
Only individuals in the following school official (i.e., financial a	ng occupations are authorized to confirm the ider	ner), Notary Public, principal or vice principal of a secondary
issued photo identification. T	ion 1 must present you wth proof of their Social I he information on their documentation must mat	nsurance Number (SIN) as well as one piece of government- ch all of the information entered in Section 1. Do not complete ered does not match the documentation provided to you.
document indicating the student's	rance Number. Acceptable proof: Social Insurance Social Insurance Number (e.g., Confirmation of Social Pension Plan Statement of Contributions).	Card (original card or photocopy) or an official Government of Canada Insurance Number from Service Canada, Canada Revenue Agency
2. Government-issued	I Photo Identification. Specify documentation re	viewed:
	nce. Indicate issuing province: nent Resident or Citizenship Card ort	
□ Provincial Health□ Other Canadian	Card with photo. <i>Indicate issuing province:</i> federal or provincial government-issued photo identification provided:	entification.
Section 3 - Authorized T	hird Party Details (to be completed by th	e authorized third party)
First name:	Last name:	
Telephone number, including		
Indicate your current occupate Senior postsecondary ins	ion:	Ext.
☐ Financial aid adminis	trator \square Registrar \square School president \square S	school owner
Name of School:		
Notary Public (You must	also provide your official stamp beside your signa	ature on this form.)
Principal or vice-principal	of a secondary school. Specify school name at	nd address:
Senior official at a Canad	lian embassy or consulate. Specify role and loca	tion:
Declaration:		<u>-</u>
Confirm that all of the followi The student listed in Sec piece of their governmen The information on the december 1.	tion 1 has provided me with valid documentation t-issued photo identification.	for proof of his or her Social Insurance Number as well as one tches the information he or she has entered in Section 1 of this
form.The information that I have	ve provided about myself is complete and true.	

Signature: Date: The ministry administers OSAP under the authority of the Ministry of Training, Colleges and Universities Act, R.S.O. 1990, c. M.19, as

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; s. 10.1 of 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 s. 266.3(4) of the Education Act, R.S.O. 1990. C. E.2, as amended. If you have any questions about the collection or use of this information, contact the Director, Student Financial Assistance Branch, Ministry of Training, Colleges and Universities, PO Box 4500, 189 Red River Road, 4th Floor, Thunder Bay, ON P7B 6G9; (807) 343-7260.

Purpose of this Form

The OSAP Access Number (OAN) is a nine-digit number that is assigned to each person who has:

- registered on the secure side of the OSAP website, and/or
- submitted a paper application for various OSAP funding instruments (e.g., OSAP for Full-Time Students, Ontario Graduate Scholarship, Explore).

Once you are assigned an OAN, it becomes your unique identifying number that will not change over time.

The Request for OSAP Access Number (OAN) form is for students who are unable to access the secure side of the OSAP website because they have forgotten or don't know their OSAP Access Number (OAN).

There are quicker ways to get access!

We strongly recommend that you try to log into the "Forgot Your OAN?" feature on the OSAP website. This feature is fast and easy and will provide you with your OAN after you answer a few questions (see details on log in page).

Did you know that you can also retrieve your OAN in person? Simply go to the nearest financial aid office at any provincially-funded university or college of applied arts and technology in Ontario (which doesn't have to be for the school that you are or will be attending) to obtain your OAN. You must provide proof of your Social Insurance Number (SIN) plus one piece of government-issued photo identification.

Who Completes this Form

The Request for OSAP Access Number (OAN) form is made up of three sections:

- Section 1 is to be completed by the student who is requesting their OAN.
- **Section 2** is to be completed by an authorized third party. An authorized third party must be an individual in one of the following occupations:
 - Senior postsecondary school official (i.e., financial aid administrator, registrar, school president or owner)
 - Notary Public,
 - Principal or vice principal of a secondary school, or
 - a senior official at a Canadian embassy or consulate
- Section 3 is also completed by the authorized third party who has confirmed your identity.

The authorized third party will confirm that the documentation you provide to them matches the information entered in Section 1 of the *Request for OSAP Access Number (OAN)* form.

What Must be Included with Your Completed Form

You **must** include photocopies of the supporting documentation you provided to the authorized third party official who completed your form. Please ensure that the photocopies you provide are legible (e.g., easy to read).

Where to Send Your Completed Form and Documentation

It is your responsibility to send your completed form and photocopies of the supporting documentation to the ministry. You may send it either by fax or by mail to:

Student Financial Assistance Branch Ministry of Training, Colleges and Universities 189 Red River Road, 4th Floor P.O. Box 4500 Thunder Bay, ON P7B 6G9 Fax: (807) 343-7278