STUDENT ENROLLMENT FORM

Financial Assistance for Nunavut Students

FANS
Nunavut Department of Education
Adult Learning & Post Secondary Services
Box 390 Arviat, Nunavut X0C 0E0

Phone FANS Toll Free 1 877 860 0680
Fax FANS Toll Free 1 877 860 0167

FANS Student Number

_____

For office use only
FANS 01 10 22

IMPORTANT IMPORTANT IMPORTANT

THIS FORM MUST BE FAXED TO THE FANS OFFICE AS SOON AS YOU ENROLL IN SCHOOL. THIS FORM CONFIRMS THAT YOU HAVE STARTED SCHOOL. YOU WILL RECEIVE YOUR BENEFITS WITHIN SEVEN DAYS OF RECEIPT OF THIS FORM BY THE FANS OFFICE.

A TO BE COMPLETED BY STUDENT

I, _____
Please print your name

declare that my eligibility for financial assistance has not changed since I was approved for student financial assistance by FANS. I agree to inform the FANS Office of any changes to my status as they occur during the school year. I understand that failure to do this may result in termination of benefits, recovery of benefits paid, and possible legal action.

_____ Student/College ID #:_____
STUDENT'S SIGNATURE

My address at while at school is:

_____ _____
MAILING ADDRESS COMMUNITY

_____ _____
TERRITORY/PROVINCE POSTAL CODE

(___|___|___) |____|____|____| -- |____|____|____|____|
PHONE

_____
E-MAIL ADDRESS

B TO BE COMPLETED BY POST-SECONDARY INSTITUTION

I, _____
NAME OF EDUCATIONAL OFFICER
CERTIFY THAT:

_____
(STUDENT'S NAME)

is registered in as a **FULL-TIME STUDENT** in a **POST-SECONDARY PROGRAM** and is in the

1st 2nd 3rd 4th 5th Year of a 1 2 3 4 5 year
(circle one) (circle one)

CERTIFICATE / DIPLOMA / DEGREE / MASTERS / PHD PROGRAM
(circle one)

in _____
PROGRAM

at _____
NAME OF INSTITUTION

The current term:

Starts: |___|___|___|___|___|___| Ends:|___|___|___|___|___|___|
Day Month Year Day Month Year

100 % of a full course load for this term is defined as:

_____ OR _____ OR _____ OR _____
COURSES CREDITS UNITS HOURS

FOR THIS TERM:

Tuition Cost	Book Cost	Mandatory Fees

CANADA STUDENT LOAN INSTITUTION CODE

_____
SIGNATURE OF OFFICIAL

_____
TITLE OF OFFICIAL

_____ _____
PHONE NUMBER FAX NUMBER

INSTITUTIONAL STAMP