



NWT Student Financial Assistance

FORM D - STUDENT ENROLLMENT FORM

TO BE COMPLETED BY STUDENT

First and Last Name		
Date of Birth - YY/MM/DD	Student ID Number	Telephone
Cell	Email Address	
<p>I declare that my personal and financial information under which I became eligible for NWT Student Financial Assistance (SFA) has not changed as of the date of this enrollment. I understand and agree that if I withdraw from a course or from my program of studies, I must notify the SFA office within 30 days. Further, I understand that it is my responsibility to ensure this Student Enrollment Form is completed correctly and submitted to the SFA Office.</p>		
<u> X </u> Signature	_____ Date - YY/MM/DD	_____ SFA PID

TO BE COMPLETED BY EDUCATIONAL INSTITUTION

This enrollment form is used to confirm a student's eligibility and CANNOT be signed and/or submitted by the institution MORE THAN ONE CALENDAR MONTH before THIS semester start date. RETURN BY EMAIL TO nwtsfa@gov.nt.ca.

Is this a Designated Educational Institution?	Yes No	Name of Institution	Name of Program							
<p>Of a 100% full course load, this student will be enrolled part-time/full-time in: 1% - 39% 40% - 59% 60% - 100% of a post-secondary course load and is registered in the Fall Winter Spring Summer semester,</p> <p>working towards a License Certificate Diploma Degree Masters Doctorate</p> <p>in year _____ of a _____ year program. The length of this current semester consists of a total of _____ weeks.</p>										
The above student is enrolled in (number of/check one):										
_____	Units	Credits	Hours	Courses	of a possible _____	Units	Credits	Hours	Courses	for this semester.
Semester Start Date - YY/MM/DD		Semester End Date - YY/MM/DD		Tuition \$	Books \$		Other Fees - explanation required:			
<u> X </u> Signature of School Official				Date - YY/MM/DD		Title of School Official				
						Institution City/Town, Province/Territory			Telephone	
						Email Address				

FOR SFA USE ONLY

This information is being collected under the authority of the *Access to Information and Protection of Privacy (ATIPP) Act*, Section 41.(1)(g) and the *Northwest Territories Student Financial Assistance (SFA) Act* and Regulations. The information will be used to determine my initial and continued eligibility for SFA and for the general administration and enforcement of this program. The privacy provisions of the *ATIPP Act* protect my information, and all applicants have the right to examine and request correction of his or her records and to request a review by the Information and Privacy Commissioner. If you have any questions about the collection of information, contact the SFA Manager, Department of Education, Culture and Employment, Box 1320, Yellowknife, NT X1A 2L9, or call 1-800-661-0793 or 1-867-767-9355.