



NWT STUDENT FINANCIAL ASSISTANCE 2024-2025 EXPANDED LOAN LIMIT APPLICATION

Une version française de ce document est disponible.

This application is for students currently receiving Student Financial Assistance **nearing** the \$60,000 loan limit, or students denied funding in 2024-2025 due to meeting the \$60,000 loan limit, to apply for assistance under the new \$90,000 loan limit.

1. Student Information

Full Name (first and last):

Date of Birth (YYYY/MM/DD):

Phone Number:

Email Address:

2. Type of Assistance

As of November 1, 2024 the loan limit changed from \$60,000 to \$90,000. Do you wish to apply for loans under the new limit of \$90,000?

Yes No

Check all boxes that you are applying for:

Remissible Loan Repayable Loan

3. Personal Information

Have there been any changes to your personal or financial information (e.g., permanent address, mailing address, banking information, institution, program, income)?

Yes No

If yes, provide updated information below:

4. Declaration and Consent

Under the authority of the *Access to Information and Protection of Privacy (ATIPP) Act*, Section 40(a), Section 40(c)(i) and the *Student Financial Assistance 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 ATIPP protect my information.

Personal information is defined under ATIPP, Section 2. All applicants have the right to examine and request correction of their 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.

Part A – Applicant

1. I declare that:

- The information given on this SFA application and in documents in support of this application is true.
- I will immediately notify the SFA program in writing if my, my spouse's or my dependant's personal information changes.
- I understand that I cannot apply for, and am not entitled to receive student financial aid from any other province, territory or country for the same period of time that I am receiving SFA from the GNWT.

2. I agree to:

- Follow the terms and conditions of any loan documents that I have signed.
- Use any SFA benefits awarded to me towards the cost of my education and return any SFA refunds or benefits that I am not entitled to.
- Provide information or documents to verify my initial and continued eligibility for SFA benefits within 20 days of request.

3. I understand that:

- The income that I receive from any source, including but not limited to Employment Insurance, Education Leave Benefits and Indigenous Skills and Employment Training Strategy, must be reported immediately to the SFA program and that it may affect the amount of SFA benefits that I am eligible to receive.
- I may have to immediately return any SFA received in prior, current or future years if there were/are changes to my personal information.
- If I make a false or misleading statement, I may be required to immediately repay all SFA benefits received and/or be denied future SFA benefits. I may also be subject to criminal prosecution.
- If I have an outstanding debt with the GNWT, I may be denied SFA, or that debt may be deducted in part or whole, from my SFA benefits.
- If I am unable to meet the GNWT's credit worthiness requirements as defined in the Financial Administration Manual, under the authority of the Financial Administration Act, I may be denied SFA benefits.
- My personal information, except for information collected from the Canada Revenue Agency, may be disclosed to third parties in accordance with Section 48 of ATIPP for the following purposes: verifying eligibility to receive a benefit or service from the GNWT, for the purpose of collecting a debt owed to the GNWT, to maintenance enforcement for the purpose of enforcing a maintenance order.
- SFA will contact other agencies to verify the information I have provided as part of determining my initial and continued eligibility for SFA benefits and to detect fraud. These agencies may include, but are not limited to the following: other GNWT departments, federal, territorial, municipal or Indigenous governments including driver and vehicle licensing programs, Employment and Social Development Canada including Record of Employment and Employment Insurance, Parental and Maternity Benefits, Canada Revenue Agency and Canada Citizenship and Immigration, Indigenous agencies, housing management bodies, financial institutions, airline and travel agencies, landlords, educational institutions, employers and child care providers.

4. I consent to the release of: personal information to the SFA program by those agencies listed in 3.g. above to verify any personal information provided to determine my initial and continued eligibility for SFA. I understand that if I consent to the release of my personal information to third parties, that this consent is valid until I advise the SFA Manager in writing that I withdraw my consent.

5. I consent to the release, by the Canada Revenue Agency, to an official of the SFA program, of information from my income tax returns, and if applicable, other required taxpayer information about me, whether supplied by me or by a third party. The information will be relevant to, and used solely for the purpose of determining and verifying my/our eligibility, entitlement for and general administration and enforcement of the SFA program under the *Student Financial Assistance Act, Regulations* and *ATIPP Act*, and will not be disclosed to any other person or organization without my approval.

This authorization is valid for the SFA program for the three taxation years prior to the year of signature, and the most recently available tax information, the current taxation year, and each subsequent consecutive taxation year, for which assistance is requested by me or on my behalf. Further, I understand that, if I wish to withdraw this consent, I may do so at any time by writing to the SFA Manager.

X

Applicant's Signature (mandatory)

Date (YYYY/MM/DD)

Part B – Spouse

6. As the applicant's spouse: I consent to the release of my personal information to the SFA program by the agencies in section 3.g. above, for the purposes of determining the applicant's initial and continued eligibility for SFA benefits. I understand that I may withdraw this consent as outlined above.

X

Spouse's Signature (mandatory)

Date (YYYY/MM/DD)

Student Financial Assistance Contact Numbers:

Phone: 1-800-661-0793/867-767-9355

Fax: 1-800-661-0893/867-873-0336

Email: nwtsfa@gov.nt.ca

Return To:

Student Financial Assistance,
Education, Culture and Employment
Government of Northwest Territories,
Box 1320, Yellowknife, NT X1A 2L9

Street Address: 4501 – 50th Avenue in Yellowknife