Manitoba

THE EDUCATION YOU WANT. | THE FUNDS YOU NEED.

MANITOBA STUDENT AID

Manitoba Student Aid Application

For Full-Time Post-Secondary Students

Instructions for the **2026-2027 Manitoba Student Aid Application** – for programs starting between **August 1, 2026 and July 31, 2027.**

COURSE LOAD

To be considered a full-time student, you must be enrolled in at least 60% of a full course load in each term. If you have a permanent disability or a persistent or prolonged disability, you must be enrolled in at least 40% of a full course load in each term. If you are attending a private vocational or private training institution, you must be enrolled in 100% of a full course load. Note: Students with a verified permanent disability or a persistent or prolonged disability may be considered full-time at a reduced course load. If you are not sure what percentage of courses you are taking, contact the financial aid office at your school.

PROCESSING TIMELINE

Please allow six to eight weeks or longer during peak times for your paper application to be processed. Once processing is complete, you will receive an email advising you to log into your online account, which contains your assessment details and a list of any required documents you will need to submit to complete your application. NOTE: You must include a valid personal email address in your application.

After your required documents are verified by Manitoba Student Aid, a confirmation of enrollment will be sent to your school. Once your full-time enrollment has been confirmed, funding will be sent to your school and any remaining funds will be sent to your bank account. **Exception:** if your school is located outside of Canada, all your funding will be deposited to the bank account on your file.

IMPORTANT: Any changes to your application (ex. marital status or course load) must be reported to Manitoba Student Aid so a reassessment can be completed.

CREATING AN ONLINE ACCOUNT

To create your online account, go to www.ManitobaStudentAid.ca. Click on the *Create an Account* link on the top right hand side of the screen.

FINANCIAL INFORMATION

You must report all financial information in Canadian funds and must have a Canadian bank account to receive Manitoba Student Aid funding.

DEADLINE

Applications must be submitted no later than 60 business days before your study period ends. Funds cannot be released after your study period end date.

HOW TO SUBMIT

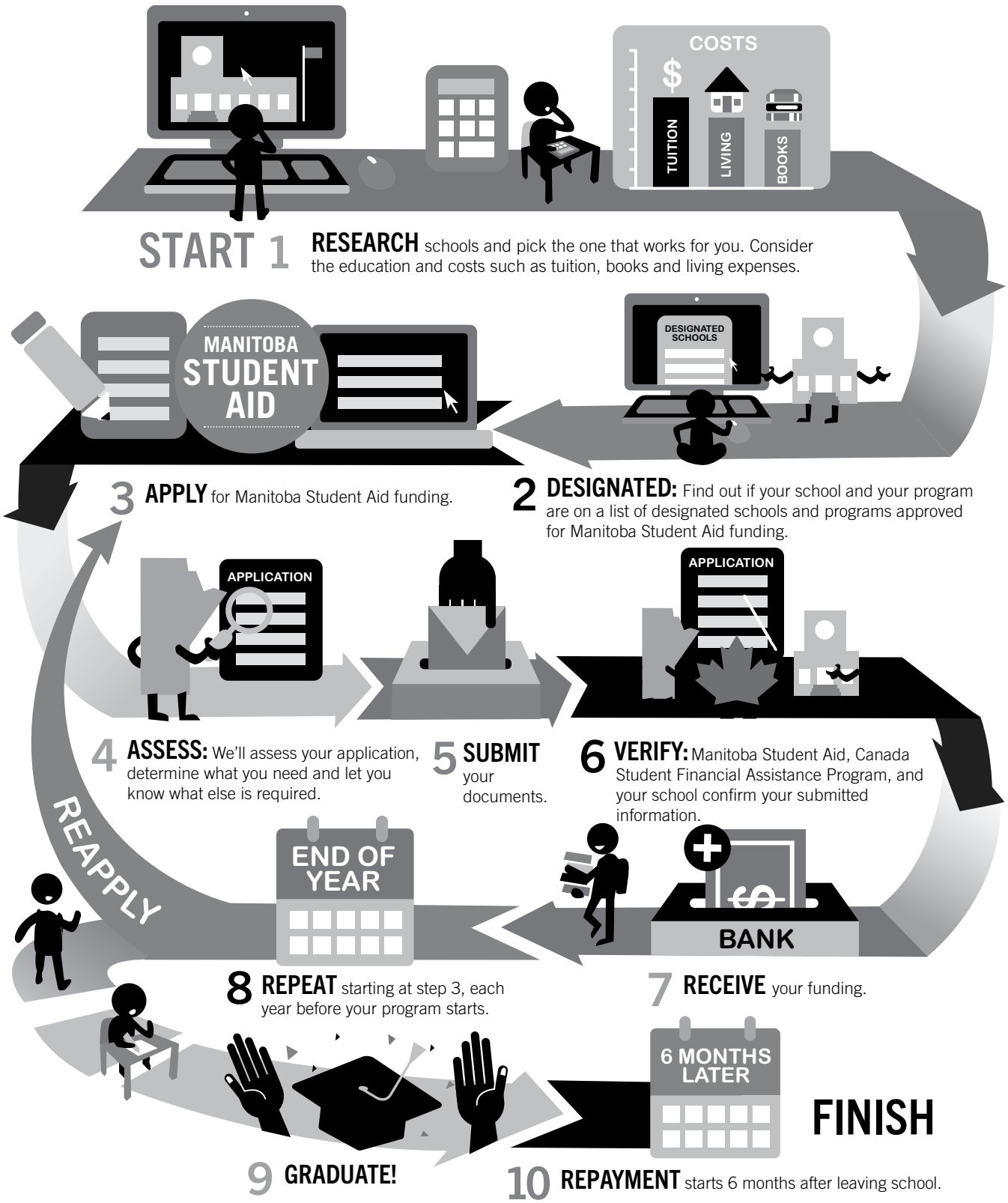
1. Print the completed application.
2. Sign and date the application in ink in all required areas.
3. Submit the completed application to Manitoba Student Aid by mail or dropbox:

Manitoba Student Aid
401-1181 Portage Avenue, Winnipeg, Manitoba R3G 0T3
(Drop box is located outside, on the East side of the building, beside the Wall Street entrance.)

Applications are available in alternate formats upon request. Cette information existe également en français.

NOTE: Information provided to Manitoba Student Aid is subject to audit and verification.

HOW GETTING YOUR MANITOBA STUDENT AID FUNDING WORKS



Manitoba

2026-2027

Manitoba Student Aid Application For Full-Time Post-Secondary Students

Section 100: Personal Information

101 In which language do you prefer to receive future communication?
☐ English ☐ French

102 Social Insurance Number (SIN)

103 Date of Birth
YYYYMMDD

104 Legal Last Name

105 Legal First Name **105a** Preferred Name

106 Mailing Address **107** City/Town

108 Province/State **109** Country **110** Postal/Zip Code

106a Permanent Address **107a** City/Town

108a Province/State **109a** Country

110a Postal Code/Zip Code

111 Phone Number
Area Code

112 Alternate Phone Number
Area Code

113 Gender ☐ Female ☐ Male ☐ Non-binary ☐ Two-spirit ☐ Another Gender Identity

114 Last day you attended high school in a standard high school setting (in Manitoba, high school is typically completed the year you turn 18). Exclude adult education.

115 Email address

Please use a personal email address (not your educational institution's email address)

Section 200: Citizenship

Check the box that applies as of your study period start date.

201 ☐ Canadian Citizen
202 ☐ Landed Immigrant/Permanent Resident of Canada
203 ☐ Protected Person

Note: International students are not eligible for Manitoba Student Aid funding.

Section 300: Student Category

Pick the one category that best fits and check all applicable boxes in that section.

301 **Married or Common-Law** If you:
☐ are married (or will be before the second half of this academic year)
☐ have lived together in a common-law relationship for at least 12 months
you and your spouse must also complete Appendix B.

302 **Single Parent** If you:
☐ have legal and physical custody and responsibility for supporting a child.
you must also complete section 1200.

303 **Single Independent Student** If you:
☐ have been active in the labour force full-time for at least two years
Note: These two years do not need to be consecutive; but each year of work must have been 12 months in a row.
☐ have been out of high school for four years
☐ have no parent, guardian, sponsor, or other supporting relative, due to death or disappearance
☐ are separated/divorced/widowed and do not have legal custody of any children
☐ are or were in the past, a ward of a child and family services agency
you are considered as an independent student.

304 **Single Dependent Student**
☐ None of the above statements apply to you.
You are considered as a dependent student and your parents must also complete Appendix C.

Section 400: Residency

Check the first box that best fits, as of your study period start date.

401 ☐ You (or your spouse, if applicable) received Canada or Manitoba Student Loans, Bursaries, or Grants from Manitoba Student Aid last year.

402 ☐ You (or your spouse, if applicable) have always lived in Manitoba.

403 ☐ You are an **independent student** (including single, single parent, married or common-law) as defined in Student Category (see Section 300) **and** Manitoba is the last place you (or your spouse, if applicable) lived/worked for 12 consecutive months before your study period, and were not a full-time student.

404 ☐ You are a dependent **student** as defined in Student Category (see Section 300) **and** your parents, guardians, or sponsors have lived in Manitoba for at least 12 consecutive months before the start of your current study period.

405 ☐ You have lived in Canada for **less than 12 months**: You are a Landed Immigrant/Protected Person and Manitoba is the **only** province you have lived in since arriving in Canada.

406 ☐ **None of the above** statements describe your situation. Please contact Manitoba Student Aid at 204-945-6321 (or toll-free in Canada and the USA at 1-800-204-1685) to determine if you need to apply to another province or territory.

Section 500: Canadian Indigenous Ancestry

Complete this question ONLY if you are one of the four Indigenous groups listed below.

501 If you were born in Canada and are of **Canadian Indigenous** ancestry, you may be eligible for additional funding. Please indicate below if you are:

☐ Métis ☐ Treaty / Status

☐ Non-Status ☐ Inuit

Section 600: Students with Disabilities

To be eligible for the Canada Student Grant for Students with Disabilities and the Canada Student Grant for Services and Equipment - Students with Disabilities, you must have a permanent disability or a persistent or prolonged disability. Examples of such disabilities are visual impairment, hearing impairment, physical disability, learning disability, and mental health disability.

Not all medical conditions qualify as a disability for the purposes of these grants.

Definition of Permanent Disability

A permanent disability limits your ability to perform the daily activities necessary to pursue post-secondary studies and is expected to remain for your expected life.

Definition of Persistent or Prolonged Disability

A persistent or prolonged disability limits your ability to perform the daily activities necessary to pursue post-secondary studies and is expected to last for a period of at least 12 months but is not expected to remain for your expected life.

601 Do you wish to declare yourself as a student with a permanent disability or as a student with a persistent or prolonged disability?

☐ Yes – Permanent Disability

☐ Yes – Persistent or Prolonged Disability

☐ No

Section 700: Accommodations

701 Indicate where you are living, or will live **during your study period:**

- ☐ At home (with parents/sponsor)
- ☐ In subsidized housing (Manitoba Housing facility)
- ☐ Other (renting, living in residence or on campus)

702 Indicate the province you are living in during your study period. _____

703 Did you or will you have to move to attend post-secondary studies? ☐ Yes ☐ No

Section 800: Relocating, Commuting and Transportation

Please note that there are yearly maximums to amounts allowed for transportation costs.

801 If you are **relocating** from one town or city to another to study, enter the total cost of one return trip home. $ _____

802 If you are using a personal vehicle to commute within Manitoba (to or from a rural area) to attend school, please indicate the number of kilometers between your home and your educational institution_____ (one way). How many times per week do you make this trip? _____ (If you travel Monday through Friday, your answer would be 5.)

Section 900: Other Contact Person

All students must complete this section.

Contact Information: Provide your parent's, sponsor's, next of kin's, or friend's name and address. **Do not include spouse or children.** If you have no parent(s)/sponsor(s) within North America, you must provide a next of kin or other contact person within Canada. See definition of parent/sponsor in **Appendix C.**

901 Relationship: ☐ Parent/Sponsor ☐ Next of Kin (example, brother or sister) ☐ Other (example, friend)

902 Last Name: _____ **903** First Name: _____

904 Phone Number: _____ _____ (Area Code) **905** Alternate Phone Number: _____ _____ (Area Code)

906 If you selected Parent/Sponsor/Next of Kin, is their address the same as yours?

☐ Yes If yes, go to **912.** ☐ No If no, you must provide the address below.

907 Address _____

908 City/Town _____

909 Province/State _____

910 Country _____

911 Postal Code/Zip Code _____

If you are married or common-law you must complete items 912 to 917.

Spouse's Personal Information

912 Last Name _____ **913** First Name _____

914 Date of Birth YYYYMMDD _____ **915** Social Insurance Number (SIN) _____

916 Phone Number _____ _____ (Area Code)

917 Occupation ☐ Employed ☐ Full-time post-secondary student ☐ Unemployed

File # _____

Section 1000: Academic Information

1001 Are you studying outside Manitoba? ☐ Yes **You must also complete items 1013 to 1016**
☐ No

1002 **Student Number** _____
Leave this blank if you do not know your student number at this time. You will be required to provide it at a later date.

1003 Full name of the educational institution you plan to attend this academic year

_____

1004 Campus name (or location) _____

1005 Name of program (example, Arts) and major or specialization, if known

_____

1006 Indicate if any of the following apply to you:
Co-op program (NOTE: paid co-op portions are not eligible for Manitoba Student Aid, only list unpaid co-op portions). ☐ Yes
Majority of courses online, correspondence, or distance learning ☐ Yes

1007 This program leads to a: ☐ Certificate ☐ Diploma ☐ Associate Degree ☐ Bachelor Degree ☐ Bachelor Honours Degree ☐ Pre-Masters/Masters ☐ Ph D

1008 If you are taking a Masters or Ph D program, are you required to pay only re-registration fees? ☐ Yes

1009 Enter the start and end dates of this year's program. Please include all the terms you plan to attend during the academic year. The study period dates entered must match your school's dates.

For students attending schools outside of Canada: Contact your school to verify if they are confirming enrolment on a term-by-term basis. If they are, you must apply for first term only, and then notify Manitoba Student Aid when you have registered for your second term courses in order for your application to be reassessed to include both terms.

Ensure the dates do not include the co-op portion (if applicable). **Start** YYYYMMDD **End** YYYYMMDD
NOTE: paid co-op portions are not eligible for Manitoba Student Aid, only list unpaid co-op portions. **This is your Study Period.**

1010 What year of your program are you enrolled in during this study period?

I am enrolled in year _____ of a _____ year program. (example: Year 2 of a 4 year Science program.)

1011 What percentage of a full course load are you taking? _____ %

If you are not sure, contact your school.

1012 Have you previously taken post-secondary courses as a full-time or part-time student at any university, college, or private vocational institution?
☐ Yes **If Yes, you must also complete Appendix A.**

If you are studying in-person or online at an institution outside of Manitoba, you must complete items 1013 - 1016.

1013 **Registrar's E-mail Address:** _____

1014 $ _____ Tuition Fees

1015 $ _____ Compulsory Fees

1016 $ _____ Mandatory Books and Supplies

***do not include residence or housing fees**

1017 **What awards would you like to apply for?**

☐ All awards including applicable grants and loans

☐ Canada Student Grant Only*

*By selecting this option, you will only receive the Canada Student Grants you are found to be eligible for. **NOTE: Not all programs are eligible for Canada Student Grants.** Should you decide to request for other financial assistance later, it is subject to re-assessment that may incur additional processing time. Please be aware that funds cannot be sent to you after your study period end date.

File # _____

Section 1100: Applicant's Resources

For each item below, enter the TOTAL INCOME for your entire study period (rounded to the nearest dollar). Do not enter weekly, bi-weekly, monthly, etc. amounts. Provide estimates if exact amounts are not known. **If you are married or common-law, also complete Appendix B.**

TOTAL for entire **Study Period**

1101 **Funding received or to be received for tuition, books, supplies, or living allowances from a sponsoring agency/ program** (e.g. Training and Employment Services, Employability Assistance for People with Disabilities). Do **NOT** include funding from:

Enter 0 (Zero) if none.

- Post-Secondary Student Support Program (PSSSP)
  - First Nations Band Funding
- Inuit Post-Secondary Education Strategy
  - Inuvialuit Regional Corporation
  - Makivik Corporation
  - Nunatsiavut Government
  - Nunavut Tuungavik Incorporated
  - Inuit Tapiriit Kanatami
- Métis Post-Secondary Education Strategy
  - Manitoba Métis Federation
  - Métis Nation British Corporation
  - Métis Nation Saskatchewan
  - Otipemisiwak Métis Government
  - Métis Nation of Ontario
  - Métis National Council
- Canada Learning Bond
- Manitoba Student Aid

Enter the **gross amount** (before deductions). ..... $ _____

1102 **Scholarships/Bursaries/Other Awards** ..... $ _____

1103 **Employment & Income Assistance (EIA) benefits** ..... $ _____

1104 **Please indicate your TOTAL INCOME for 2025 (this is the amount from line 15000 on your Income Tax Return)** $ _____

Section 1200: Applicant's Dependant Children

Applicants with dependant children – complete this section.

1201 List all children you have legal and physical custody and responsibility for supporting. Do not include children employed full-time, on Employment Insurance, on Employment and Income Assistance, or who have attained independent status (see Student Category in Section 300). Please indicate if any of these dependents have a permanent disability.

Name	Date of Birth (YYYY/MM/DD)	Pre-School/ Kindergarten to Grade 12	Post-Secondary (after Grade 12)	Person with a Permanent Disability
_____	YYYYMMDD	☐	☐	☐
_____	YYYYMMDD	☐	☐	☐
_____	YYYYMMDD	☐	☐	☐
_____	YYYYMMDD	☐	☐	☐

1202 If you will be paying daycare costs, how much per month? $_____/month

APPLICANT'S DECLARATION AND CONSENT

2026-2027

IMPORTANT - APPLICANT (and SPOUSE, if applicable) MUST READ AND SIGN

I declare that:

- All information provided on this application is complete and true to the best of my knowledge.
- I will use any assistance that I receive to pay educational costs first and then living costs directly related to my course of study, and not for any other purpose.
- I will not receive student financial assistance from any other province or country for the same period of study.
- I meet the residency requirement in section 5 of the Student Aid Regulation, MR 143/2003.

I understand that:

- I must immediately notify Manitoba Student Aid in writing of any changes to information reported on my application.
- If I fail to provide accurate and up-to-date information on my application, I might be required to immediately repay all or part of the assistance I received and my requests for future assistance may be refused.
- I might be required to immediately repay all or part of the assistance in the event of an overaward, whether the overaward is a result of an error on my part or on the part of my spouse, my parent, or my educational institution, or the Manitoba Department of Advanced Education and Training, its agents or service providers.
- I will be required to repay any loan, bursary or award I am not entitled to receive (overawards), and I understand and agree that these may be deducted from subsequent awards, or the award amount may be added to my existing Manitoba Student Loan, or a new loan might be created to repay the debt.
- Payments and repayments I am required to make as part of the Manitoba Student Aid Program, including for overawards, are debts due and owing to the Government of Manitoba, payable immediately on demand.
- If I default on my Manitoba Student Aid Program debt repayments:
  - o The debt can be registered with the Canada Revenue Agency (CRA)'s Refund Set-off Program (RSO), meaning the Manitoba Student Aid Program can apply to take my debt repayments from my tax refunds or GST cheques.
  - o The Government of Manitoba may choose to apply its right of set-off under section 47 of The Financial Administration Act, meaning the Government of Manitoba can deduct the amount I owe out of any amount of money otherwise payable to me from the Government of Manitoba or its agencies.
  - o Information about the debt may be provided to agents, service providers and collection agencies (including the CRA) acting on behalf of the Government of Manitoba for debt collection purposes.
- If I default on my Canada Student Financial Assistance Program or Manitoba Student Aid Program debt repayments, or give false or misleading information (including on my application form), Manitoba Student Aid may provide certain information, including personal information about me, to law enforcement agencies, the courts, financial institutions, and service providers and collection agencies (including the CRA) acting on behalf of the Government of Canada or the Government of Manitoba, and my credit rating will be affected. I also understand that I might be required to immediately repay any assistance, and my requests for future assistance may be refused.

I authorize:

- The Canada Student Financial Assistance Program or Manitoba Student Aid to directly transfer all or a portion of my student financial assistance to my Educational Institution (EI) where my EI requests the payment of my academic fees.
- Manitoba Student Aid to create a new loan in overaward situations and I understand and agree that I am responsible for repaying the new loan. I also understand that this new loan may not be eligible for repayment assistance.

I make this declaration knowing that:

- Fraud and forgery are criminal offences under the Criminal Code of Canada. Anyone found guilty of an offence is liable to be fined up to $1,000 under the two federal Acts and to be fined up to $5,000 under The Student Aid Act of Manitoba.
- It is an offence under the Canada Student Loans Act, the Canada Student Financial Assistance Act and The Student Aid Act of Manitoba to knowingly give false or misleading information.
- Information provided in this application is subject to audit and verification and may be disclosed to law enforcement agencies or other authorities where fraud is suspected or confirmed.

CONSENT TO INDIRECT COLLECTION AND DISCLOSURE OF PERSONAL INFORMATION

I, and my spouse (if applicable), understand that Manitoba Student Aid may need to indirectly collect and disclose personal information and personal health information about me (and my spouse) including but not limited to my educational and employment history, and information about my (and my spouse's) financial circumstances, income, resources, and credit history for the following purposes:

- To determine and verify my eligibility for student financial assistance and to process this application;
- To administer, enforce and evaluate the Manitoba Student Aid Program (including related policies and legislation); and
- For research, planning and reporting purposes related to the Manitoba Student Aid Program.

I, and my spouse (if applicable), consent to the indirect collection and disclosure of personal information and personal health information between the following persons and entities and Manitoba Student Aid, its agents and service providers (including the National Student Loans Service Centre) for these purposes:

- Federal, provincial, and municipal government departments, agencies, and Crown corporations including, but not limited to, the Canada Revenue Agency, Employment and Income Assistance within the Manitoba Department of Families, Training and Employment Services within the Manitoba Department of Business, Mining, Trade and Job Creation, and Employment and Social Development Canada; and
- Banks, trust companies, credit unions, or financial institutions; any funding sources including, but not limited to, band funding, benefit providers, or sponsoring agencies; consumer credit reporting agencies; collection agencies; my educational institution; current or past employers.

This consent is voluntary and can be withdrawn at any time, but withdrawal may result in me being denied student financial assistance or being required to immediately repay all or part of the student financial assistance received, and I might not be allowed to receive student financial assistance in the future.

I understand and agree that the Declarations, Authorizations and Consents that I make or give on this application for student financial assistance from Manitoba and Canada will also apply to all future applications that I make for such student financial assistance.

Signature of Applicant Signatures are to be written in ink.

X S I G N H E R E

SIN of Applicant **Date** YYYYMMDD

I understand and agree that the Declarations, Authorizations and Consents that I make or give on this application for student financial assistance from Manitoba and Canada will also apply to all future applications for which student financial assistance is requested by my spouse.

Signature of Spouse Signatures are to be written in ink.

X S I G N H E R E

SIN of Spouse **Date** YYYYMMDD

PRIVACY NOTICE

Manitoba Student Aid is collecting your personal information and personal health information under the authority of The Student Aid Act of Manitoba, the Canada Student Loans Act, the Canada Student Financial Assistance Act, clauses 36(1)(a) and (b) of The Freedom of Information and Protection of Privacy Act of Manitoba (FIPPA), and section 13 of The Personal Health Information Act of Manitoba (PHIA). Your information will be used for the following purposes:

- To determine and verify eligibility for student financial assistance and to process this application;
- To administer, enforce and evaluate the Manitoba Student Aid Program (including related policies and legislation); and,
- For research, planning and reporting purposes related to the Manitoba Student Aid Program.

Any other use of your personal information or personal health information by Manitoba Student Aid must be authorized by FIPPA and PHIA.

If you have any questions about the collection of your personal information or personal health information, please contact the Manitoba Student Aid at 401-1181 Portage Avenue, Winnipeg, Manitoba, R3G 0T3; phone number: 204-945-6321; email manitobastudentaid@gov.mb.ca.

CONSENT TO THE RELEASE OF TAXPAYER INFORMATION

I, and my spouse (if applicable), consent to the Canada Revenue Agency disclosing to Manitoba Student Aid of the Department of Advanced Education and Training, information from my/our respective income tax returns and other taxpayer information that is necessary for the purpose of determining and verifying my eligibility for student financial assistance, and to administer, enforce and evaluate the Manitoba Student Aid Program established under The Student Aid Act of Manitoba and the Regulations made under it. I understand that this information will be used solely for these purposes and will not be disclosed by Manitoba Student Aid to any other person without my consent, unless required or authorized by law.

This consent is valid for the two taxation years prior to the year of signature of this consent, the year of signature and for any other subsequent year for which assistance is requested.

Name of Applicant (please print)

Signature of Applicant Signatures are to be written in ink.

X S I G N H E R E

SIN of Applicant **Date** YYYYMMDD

Name of Spouse (please print)

Signature of Spouse Signatures are to be written in ink.

X S I G N H E R E

SIN of Spouse **Date** YYYYMMDD

CONSENT TO THE INDIRECT COLLECTION AND DISCLOSURE OF INFORMATION FROM THE SOCIAL INSURANCE REGISTER

My signature indicates that I consent to the verification of my personal information which is provided in support of my application for federal and provincial student financial assistance with information contained in Employment and Social Development Canada's (ESDC) Social Insurance Register. This information will be disclosed to ESDC for the purpose of confirming the accuracy of my identification in the context of my application for federal and provincial student financial assistance.

Signature of Applicant Signatures are to be written in ink. **Date**

X S I G N H E R E YYYYMMDD

Manitoba

File # _____

Appendix A

Section 1300: Academic History

If you have taken any previous post-secondary education - complete this appendix.

1301 Complete this section.

- Report all post-secondary studies you have taken **before** the year of study you are applying for now.
- List each year of study on a separate line (maximum of 52 weeks per line). If you need more space, attach a piece of paper.
- List fall/winter separately from spring/summer classes.
- List part-time separately from full-time studies.
- Do not list individual courses unless you took only one course in that year.
- Do not list anything older than 10 years.

Institution Name	Program Name	Certification to be received (Bachelor's, Diploma, Certificate, Master, PhD)	Start Date	End Date	Check the box if you passed the minimum course load	Check the box if you received your Certification
U of Manitoba	Arts	Bachelor's	2025 09 01	2026 04 23	☑	☐
Red River College	Business Admin	Diploma	2024 09 01	2025 06 27	☑	☑
Red River College	Business Admin	Diploma	2023 09 01	2024 06 26	☑	☐

LIST ALL **FULL-TIME** EDUCATION IN THE BELOW CHART

Institution Name	Program Name	Certification to be received (Bachelor's, Diploma, Certificate, Master, PhD)	Start Date	End Date	Check the box if you passed the minimum course load	Check the box if you received your Certification
					☐	☐
					☐	☐
					☐	☐
					☐	☐
					☐	☐

LIST ALL **PART-TIME** EDUCATION IN THE BELOW CHART

Institution Name	Program Name	Certification to be received (Bachelor's, Diploma, Certificate)	Start Date	End Date	Check the box if you passed the minimum course load	Check the box if you received your Certification
					☐	☐
					☐	☐
					☐	☐

1302 How many years have you received full-time funding from Manitoba Student Aid for the program/faculty in which you are **currently enrolled**? _____

Note: For university students:

- a fall term only counts as 0.5 year
- a winter term only counts as 0.5 year
- a fall and winter term counts as 1 year
- a spring/summer term only counts as 0.5 year
- Include years when you voluntarily withdrew.
- Do not include previous certificates, diplomas, or degrees received before your current program.
- Do not include the years for any undergraduate degree if you are taking an After Degree program.

1303 Did you receive a Canada Student Loan in any previous year? ☐ Yes ☐ No

1304 Did you pass the minimum course load during the last time you enrolled in full-time post-secondary education/training? If you are not sure, contact your school.

☐ Yes ☐ No ☐ I've never attended full-time post-secondary education/training.

Section 1400: Spouse's Resources

Indicate whether your spouse will be receiving any of the following types of income while you are in school.

Select Yes or No for each item.

1401 Employment Insurance (EI) Benefits	Yes ☐	No ☐
1402 Provincial and Federal Disability Benefits	Yes ☐	No ☐
1403 Employment and Income Assistance (EIA)	Yes ☐	No ☐

1404 Indicate your spouse's TOTAL INCOME for 2025 (this is the amount from line 15000 on your spouse's Income Tax Return) ..... $_____

Important to know

Manitoba Student Aid may verify or audit the information you provide.

Appendix C

Section 1500: Parental Information

Parents of Dependant Applicants – complete this section.

The term parent includes natural parents, step-parents, legal guardians, and sponsors. Sponsors include people who sponsor immigrants to Canada.

1501 Parents' present marital status:

☐ Single ☐ Married ☐ Common-Law ☐ Separated/Divorced ☐ Widowed

1502 Parents' information

Parent #1

Last Name _____ First Name _____

Date of Birth YYYYMMDD _____ Social Insurance Number (SIN) _____

Parent #2

Last Name _____ First Name _____

Date of Birth YYYYMMDD _____ Social Insurance Number (SIN) _____

Please report all of your parent's income. Rounded to the nearest dollar. If your parents earned income outside of Canada during the previous year and have not filed a Canadian tax return, please ensure that the income amount is converted to Canadian dollars.

		Parent #1	Parent #2
1503	Total Income (this is the amount from line 15000 on your Income Tax Return).....	$	$
1504	CPP (line 30800)*	$	$
1505	Employment Insurance (line 31200)*.....	$	$
1506	Tax Payable (line 43500)*	$	$

* Refer to the Schedule 1 of your 2025 Income Tax Return for this information.

1507 Dependant Children

List all children you have legal and physical custody and responsibility for supporting, **including the applicant**. Do not include children employed full-time, on Employment Insurance, or Employment and Income Assistance, or who have independent status. See Student Category in Section 300, for information about dependent and independent status.

Name	Date of Birth (YYYY/MM/DD)	Post-Secondary Student
_____	YYYYMMDD	☐
_____	YYYYMMDD	☐
_____	YYYYMMDD	☐
_____	YYYYMMDD	☐

Appendix C continues on page 12.

File # _____

Appendix C (continued)

PARENTAL DECLARATION AND CONSENT

IMPORTANT - PARENTS OF DEPENDANT APPLICANTS MUST READ AND SIGN

Name of Applicant _____ **SIN of Applicant** _____

DECLARATION, AND CONSENT TO COLLECTION AND RELEASE OF INFORMATION

I declare that:

- The information given in this Appendix C in support of my dependant's application for student financial assistance is complete and true to the best of my knowledge, and I will promptly notify Manitoba Student Aid of any changes.

I understand that:

- If I fail to provide accurate and up-to-date information, my dependant might be required to immediately repay all or part of the assistance received and the dependant might not be allowed to receive student financial assistance in the future.
- Manitoba Student Aid will not hold me liable for loans given to my dependant.

I make this declaration knowing that:

- Fraud and forgery are criminal offences under the Criminal Code of Canada. Anyone found guilty of an offence is liable to be fined up to $1,000 under the two federal Acts and to be fined up to $5,000 under The Student Aid Act of Manitoba.
- It is an offence under the Canada Student Loans Act, the Canada Student Financial Assistance Act and The Student Aid Act of Manitoba to knowingly give false or misleading information. Information provided in the appendix is subject to audit and verification and may be disclosed to law enforcement agencies or other authorities where fraud is suspected or confirmed.

CONSENT TO INDIRECT COLLECTION AND DISCLOSURE OF PERSONAL INFORMATION

I understand that Manitoba Student Aid may need to obtain personal information about me, including my reported income.

- to determine and verify the eligibility of my dependant (the applicant) for student financial assistance and to investigate my dependant's application;
- to administer, enforce and evaluate the Manitoba Student Aid Program (including related policies and legislation); and
- for research, planning and reporting purposes related to the Manitoba Student Aid Program.

I consent to the indirect collection and disclosure of my personal information for these purposes between the following persons and entities and Manitoba Student Aid, its agents and service providers (including the National Student Loans Service Centre): federal, provincial, and municipal government departments, agencies and Crown corporations, including, but not limited to, the Canada Revenue Agency and Employment and Social Development Canada.

I understand that my consent is voluntary and can be withdrawn at any time, but withdrawal may result in my dependant being denied student financial assistance.

I understand and agree that the Declarations, Authorizations and Consents that I make or give in this appendix will also apply to all future applications for which student financial assistance is requested by my dependant.

Signature of Parent #1 **Signatures are to be written in ink.**

X S I G N H E R E _____

SIN of Parent #1 _____

Date YYYYMMDD _____

Signature of Parent #2 **Signatures are to be written in ink.**

X S I G N H E R E _____

SIN of Parent #2 _____

Date YYYYMMDD _____

PRIVACY NOTICE

Manitoba Student Aid is collecting your personal information on this form under the authority of The Student Aid Act of Manitoba, the Canada Student Loans Act, the Canada Student Financial Assistance Act and the regulations under these Acts, and clauses 36(1)(a) and (b) of The Freedom of Information and Protection of Privacy Act of Manitoba (FIPPA). Your information will be used for the following purposes:

- To determine and verify the eligibility of your dependant (the applicant) for student financial assistance and to process the applicant's application;
- To administer, enforce and evaluate the Manitoba Student Aid Program (including related policies and legislation); and
- For research, planning and evaluation purposes related to the Manitoba Student Aid Program.

Any other use of your personal information by Manitoba Student Aid must be authorized by FIPPA.

If you have any questions about the collection of your personal information, please contact the Director of Manitoba Student Aid at 401-1181 Portage Avenue, Winnipeg, Manitoba, R3G 0T3; phone number: 204-945-6321; email manitobastudentaid@gov.mb.ca.

CONSENT TO THE RELEASE OF TAXPAYER INFORMATION

I consent to the Canada Revenue Agency disclosing to Manitoba Student Aid of the Department of Advanced Education and Training, information from my income tax returns and other taxpayer information that is necessary for the purpose of determining and verifying the applicant's eligibility for student financial assistance and investigating the applicant's application, to administer, enforce and evaluate the Manitoba Student Aid Program established under the Student Aid Act of Manitoba and the Regulations made under it. I understand that this information will be used solely for these purposes and will not be disclosed to any other person without my consent, unless required or authorized by law. This authorization is valid for the two taxation years prior to the year of signature of this consent, the year of signature and for any other subsequent year for which assistance is requested by my dependant child.

Name of Parent #1 (please print) _____

Signature of Parent #1 **Signatures are to be written in ink.**

X S I G N H E R E _____

SIN of Parent #1 _____

Date YYYYMMDD _____

Name of Parent #2 (please print) _____

Signature of Parent #2 **Signatures are to be written in ink.**

X S I G N H E R E _____

SIN of Parent #2 _____

Date YYYYMMDD _____

Manitoba

File # _____