

Reduction in Parental Income

If your parent's income this year is expected to be lower than last year's income, provide estimates of what the income is projected to be this year. Documentation may be requested for verification. Submit a separate form for each parent, if applicable.

Student Name: _____

File #: _____

Parent Name: _____

Reason for income reduction: Loss of employment Reduced hours Other, please specify: _____

2020 Income	Actual	Estimate	Total
	Jan 1 st to _____ (today's date)	_____ (today's date) to Dec 31 st	
Gross Salary (Wages)			
Employment Insurance Income			
Net Self-Employed Income			
Non-Taxable Income Sources			
Investment Income			
Other Income (Specify)			

2020 Deductions	Actual	Estimate	Total
	Jan 1 st to _____ (today's date)	_____ (today's date) to Dec 31 st	
Income Tax Deductions			
Canada Pension Plan Deductions			
Employment Insurance Deductions			

Parent Signature

Date

Daytime Phone Number

Submit completed form to:

Manitoba Student Aid
401 – 1181 Portage Ave
Winnipeg, MB R3G 0T3

Email: ManitobaStudentAid@gov.mb.ca
Fax: 204-948-3421

All information provided to Manitoba Student Aid is subject to verification and audit.

DEADLINE: You must submit all required information *no later than 45 days before your period of study ends*. Funds cannot be released after your study period end date.

If you have any questions or require clarification, please contact Manitoba Student Aid:
204-945-6321 or toll-free (in Canada and the USA): 1-800-204-1685
Email: ManitobaStudentAid@gov.mb.ca