

FINANCIAL INSECURITY FORM PERSEVERANCE SCHOLARSHIP – WINTER 2025

Please complete this form directly with Adobe Acrobat Reader and sign it (electronic signature accepted).

IDENTIFICATION						
Last Name	First Name					
Student number	Institutional email					
Program of study	Date of admission (yyyy-mm-dd)					
Director- CRMR (if applicable) Co-Director-CRMR (if applicable)						
STUDENT						
 I agree that my file may be shared with the members of the selection committee for the analysis of my application. By submitting this application, I agree that the selection committee may verify my government student financial assistance file, if necessary. I certify that the information in my file is accurate. Student's signature						
SUPERVISOR						
I certify the	I certify that I have read the information in my student's application and that it is accurate.					
I agree with the timeline of work proposed and believe that my student will be able to follow it.						
Supervisor's signature Date						
FINANCIAL INSECURITY FORM						
Which of these choices fits your current situation?						

I have applied for financial support (government loans and grants).

I have reached the debt limit or the maximum number of months allowed under the government loans and grants.

I did not apply for financial support (government loans and gra	• •	

I cannot apply for financial support (government loans and grants) because I am not a permanent resident or a Canadian citizen.

Were you registered as a full-time student the last two sessions?

Yes	🗌 No	
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If you answered no, please chose one of the following options :

- I was not enrolled full-time because I was working full-time.
- I was not enrolled full-time for medical reasons.
- Other, please explain:

What is the amount of employment income you anticipate for the winter 2025?

	\$ employment income.								
	\$	scholarships, other than	government loans a	and grants.					
	\$ in government loans and grants.								
	\$ actual contribution of the parents expected.								
Complete this section only if, for the winter 2025 semester, you have a job (contract or paid employment) in addition to being a full-time student									
Start date			Employer						
End date			Job title						
Briefly describe your tasks			Number of hours/	week					
Start date			Employer						
End date			Job title						

Please explain the main reasons for your financial difficulties, and how this scholarship would help you.