

## Purpose

Use this form to request a review of the local travel costs used in the assessment of your **2024-25 OSAP Application for Full-Time Students**.

You can request that your additional local travel costs during your study period be considered if one or more of the following applies to you:

- You drive more than 30 km from your home to your campus or school placement; or
- You drive because it takes more than 1 hour by public transit to get from your home to your campus or school placement; or
- You drive because there is no public transit between your home and your campus or school placement; or
- You have exceptional public transit costs from your home to your campus or school placement (for example you are required to use multiple transit systems or non-municipal transit).

Note:

- Reviews for students who commute with a personal vehicle will NOT consider the costs of either vehicle insurance or maintenance.
- Reviews will not be approved for students travelling with a spouse or parent who is commuting to work.
- Before you complete this form, you must have already submitted a 2024-25 OSAP Application for Full-Time Students.

## Required documents

You must provide documentation to support your review request. See **Section B: Review request details** for information on these documentation requirements.

## How to submit this form

You can upload your completed form online. Log into the OSAP website and go to your application to use the “Print or upload documents” button. Or, you can submit a paper copy as follows:

### **If you’re going to a school in Ontario:**

Send this completed form and your required document(s) to your school’s financial aid office.

### **If you’re going to a school outside of Ontario:**

Send this completed form and your required document(s) to: Student Financial Assistance Branch, Ministry of Colleges and Universities, PO Box 4500, 189 Red River Road, 4th Floor, Thunder Bay, Ontario P7B 6G9.

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## Deadline

This form and all required documents must be received by your financial aid office or the ministry no later than 40 days before the end of your 2024-25 study period.

## Questions?

### **If you're going to a school in Ontario:**

Contact the financial aid office at your school.

### **If you're going to a school outside of Ontario:**

Contact the ministry at: Student Financial Assistance Branch, Ministry of Colleges and Universities, PO Box 4500, 189 Red River Road, 4th Floor, Thunder Bay, Ontario P7B 6G9.

General inquiry telephone service is available Monday to Friday, 8:30 AM - 4:30 PM (Eastern Time)

- Telephone: 807-343-7260.
- Toll-free in North America: 1-877-OSAP-411 or 1-877-672-7411
- TTY: 1-800-465-3958

**Section A: Student's information**

**Social Insurance Number:**

**Ontario Education Number (OEN), if assigned:**

**Last name:**

**First name:**

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**Student's mailing address**

**Street number and name, rural route, or post office box:**

**Apartment:**

**Street number and name, rural route, or post office box:**

**Postal code or zip code:**

**City, town, or post office:**

**Province or state:**

**Country:**

**Area code and telephone number:**

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**Information about student's school and program**

**What is the name of the school you plan to attend or are currently attending for your 2024-25 study period?**

**Student number at your school:**

**What are the start and end dates of your 2024-25 study period?**

**From:**

Month Year

**To:**

Month Year

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## Section B: Review request details

Indicate the basis for your review request. If your situation is not listed, contact your financial aid office or the ministry before completing this form. See the section, "Questions?" on page 2 for contact details.

### Reason for review (check all that apply) and travel/cost details:

- I have exceptional transit expenses from my home to my campus or school placement because I use multiple public transit systems or non-municipal transit.

Please provide the following information:

Daily transit costs: \_\_\_\_\_

Number of days of travel per week: \_\_\_\_\_

Number of weeks of travel per OSAP-approved study period: \_\_\_\_\_

- I drive more than 30 km from my home to my campus or school placement.
- I drive because it takes me more than one hour by public transit to travel from my home to my campus or school placement.
- I drive because public transit is not available from my home to my campus or school placement.

If any of the above three statements are applicable, please provide the following information:

### Travel details:

Home Address: \_\_\_\_\_

Destination Address: \_\_\_\_\_

KM travel a day (round trip): \_\_\_\_\_

Number of days of travel per week: \_\_\_\_\_

Number of weeks of travel per OSAP-approved study period: \_\_\_\_\_

### Required documentation:

You must provide all of the following documentation to support your review request:

- A letter signed and dated from you outlining the following:
  - Your method of travel (for example, personal vehicle, shared ride with other student(s), multiple public transit systems - indicate companies);
  - Your total weekly travel costs during your study period (costs for a personal vehicle are gas only, not any maintenance and/or insurance costs); if you share a ride with other student(s), please include how many other students share the weekly travel cost.
  - An explanation for use of multiple public transit systems, if applicable; **and**
- A calculation of the distance/time of your travel route (for example, home and campus or placement marked on a Google map of the area); and
- A copy of your course schedule that indicates the days and times you are in class (or on placement).
- If you are a single independent student who does not live with your parents: An explanation of why you have not moved closer to your campus or placement location.
- If you are an Ontario Disability Support Program (ODSP) recipient, a letter is required from your ODSP case worker. The letter must indicate that the additional funding being requested will not have an impact on your ODSP income support.

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Note:

- You must sign and date any letters you provide with this review request.
- Include your name and student number on all documentation provided.
- You may be required to provide additional documentation (for example, receipts for a monthly transit pass, electronic print-outs showing fares for your trips, or gas receipts if using personal vehicle) based on the information you provide with this request.

**Section C: Student declaration**

- I have given complete and true information on this form.
- I understand that I am responsible for providing all required supporting documentation as indicated on this form or as directed by my financial aid office or the ministry.
- I understand that if my review request is approved, my OSAP application will be reassessed based on the information I have provided for this review.
- I understand that if my application is reassessed, it may affect my eligibility and the type and amount of financial assistance I may receive.
- If I received financial assistance in excess of my entitlement, I will be responsible for the repayment of the amount of excess financial assistance received and I acknowledge that any future amount of financial assistance I am entitled to receive may be reduced by the amount owed.
- I understand that any grants that I receive may be converted into loans if I do not meet the terms and conditions of the Ontario Student Grants in the Ontario Student Grants and Ontario Student Loans Regulation under the *Ministry of Training, Colleges and Universities Act* and the terms and conditions of the Canada Student Grants in the Canada Student Financial Assistance Regulations under the *Canada Student Financial Assistance Act*.
- I understand that if my review request is accepted, my OSAP application will be re-assessed based on the information I have provided for this review. I will be bound by the Declarations I signed on my 2024-25 OSAP Application for Full-Time Students.

Note: if you are completing this form electronically, use the “Fill & Sign” feature or “Digital ID” in Adobe Reader or your PDF program to add your signature.

**Signature of student:**

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**Date:**

Day    Month    Year

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Your personal information will be used to administer and finance the Ontario Student Assistance Program (OSAP) as set out in the notice of Collection and Use of Personal Information on your OSAP application and in accordance with the consents you signed on your OSAP application. The Ministry of Colleges and Universities administers and finances OSAP under the legal authority set out on your OSAP application. If you have any questions about the collection, use and disclosure of your personal information, contact the Director, Student Financial Assistance Branch, Ministry of Colleges and Universities, PO Box 4500, 189 Red River Road, Thunder Bay, Ontario P7B 6G9; (807) 343-7260.