

Purpose

Normally, your spouse's 2023 income information is used when assessing your 2024-25 OSAP Application for Full-Time Students. Use this form to request that your spouse's estimated 2024 income be used instead of their 2023 income.

You can make this request if your spouse's financial situation changed in 2024 because of unexpected and/or one-time circumstances, such as:

- loss of full-time employment and/or new employment at a lower pay rate;
- illness, accident or retirement; and/or
- receipt of a severance package, insurance settlement or other one-time income payout.

In order to complete this form, you must have already submitted a 2024-25 OSAP Application for Full-Time Students.

Required documents

Your spouse must provide documentation (e.g. letter from employer, legal documents) that supports the circumstances that led to a change in income. An original signature is required to complete the form.

Verification of income

The ministry verifies income information provided in this form. If your spouse's 2024 income can't be verified with the Canada Revenue Agency (CRA), they must complete the 2024-25 Spouse Income Verification: Canadian Non-taxable and Foreign Income form.

If the ministry cannot verify your spouse's estimated 2024 income within 12 months from the start of your 2024-25 study period, any Ontario Student Grant you receive will be converted to a loan that you must repay.

If your spouse's final verified 2024 income is greater than the estimate you provide, your OSAP will be reassessed using their actual 2024 income and grants you have received based on the lower estimate may be converted to loans.

How to submit this form

You can upload your completed form online. Log into the OSAP web site 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 your completed form and all required document(s) to your school's financial aid office.

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

Send your completed form and all 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.

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

Student's personal information

Social Insurance Number:

Ontario Education Number (OEN), if assigned to you:

Last name:

First name:

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:

Province or state:

City, town, or post office:

Postal code or zip code:

Country:

Area code and telephone number:

Student's study period details

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:

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Student's 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 my spouse's estimated income provided on this form. This estimated income would be used because non-recurring and/or unexpected circumstances have occurred and my spouse's prior year income does not accurately reflect our family's current income situation.
- I understand that the ministry will verify my spouse's 2024 estimated income with Canada Revenue Agency (CRA) or through other means when income information becomes available.
- I understand that if my application is reassessed after my spouse's 2024 estimated income is verified, it may affect my eligibility for OSAP and the type and amount of financial assistance I may receive.
- I understand that if the income I have reported, or my spouse has reported cannot be verified to the satisfaction of the Minister, the full amount of my Ontario Student Grants will be converted to loan.
- 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 Grant in the *Canada Student Financial Assistance Regulations* under the *Canada Student Financial Assistance Act*.

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:

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.

Section B: Spouse's information and estimated income

Reason for change in income

- Loss of full-time employment and/or new employment at a lower pay rate
- Illness, injury, death, or parental leave
- Retirement
- Receipt of a severance package, insurance settlement, or other one-time income payout
- Significant change in annual income related to self-employment, (for example, farming or any other type of self-employment where income fluctuates significantly)
- Other: Provide a brief description of your circumstances below:

Required documentation

Spouse must provide the following:

- If the reason for the change in income is “Loss of full-time employment”, provide a letter or copy of a notice of layoff from their employer, or proof of approval or receipt of government income replacement programs such as Employment Insurance.
- For all other reasons, provide documentation confirming the circumstances indicated, such as a letter from their employer, proof of approval or receipt of government support program such as Ontario Works or Loss of Earnings Benefits from the Workplace Safety and Insurance Board (WSIB), legal documents, Better Jobs Ontario Agreement, proof of sale of property, etc.

First name:

Last name:

Social Insurance Number:

Estimated 2024 income

Spouse must enter an estimate of their 2024 total income from January 1, 2024 to December 31, 2024. Enter the amount in dollars only; do not indicate cents or use periods or commas. If your spouse expects to enter information on line 21000 (deduction for elected split-pension amount) on their 2024 income tax returns, subtract the amount that will be entered on line 21000 from the amount that will be entered on line 15000 and enter this as the estimated income amount.

If your spouse's final verified 2024 income is greater than the estimate you provide, your OSAP will be reassessed using their actual 2024 income, and grants you have received based on the lower estimate may be converted to loans.

Estimated total income as will be reported on line 15000 of 2024 Canadian income tax return:

Government income replacement programs, including Employment Insurance is taxable income and should be included here.

Do not include tax-free benefits or refundable tax credit (e.g. Canada Child Benefit, Ontario Trillium Benefit)

\$

Estimated Canadian non-taxable income and/or foreign income (taxable and non-taxable) that will not be reported on spouse's 2024 Canadian income tax return:

\$

Spouse's declaration

- I have given complete and true information on this form.
- I have provided all required supporting documentation required by this form.
- I understand that if this review request is approved, my spouse's OSAP application will be reassessed based on my estimated income provided on this form. This estimated income would be used because non-recurring and/or unexpected circumstances have occurred, and my prior year income does not accurately reflect our family's current income situation.
- I understand that the ministry will verify my 2024 estimated income with Canada Revenue Agency (CRA) or through other means when income information becomes available.
- I understand that if my spouse's application is reassessed after my 2024 estimated income is verified, it may affect my spouse's eligibility for OSAP, and the type and amount of financial assistance my spouse receives. Any grants that my spouse receives may be converted into loans if the reassessment results in a determination that my spouse is no longer eligible for the grants or that my spouse is no longer entitled to the amount of the grants received.
- I understand that any Ontario Student Grants that my spouse receives will be converted into loans if the 2024 estimated income I reported cannot be verified to the satisfaction of the Minister.

Signature of spouse:

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Date:

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