

Students who are pursuing their studies outside Québec must send this form to Aide financière aux études to receive the student financial assistance to which they are entitled, if applicable.

It must be duly completed by an authorized officer of the educational institution. That person must refer to the information in the letter sent to the student and the *Useful Information* section of this form.

Reserved for Aide financière aux études

Section 1 Student's Personal Information

Last name

Permanent code assigned by the Ministère

First name

Date of birth Y M D

Social insurance number

Section 2 Educational Institution

Name of educational institution

Code assigned by the Ministère

Section 3 Confirmation of Attendance

This section must be completed by an authorized officer of the registrar's office or the financial assistance office of the educational institution concerned, or by the person in charge of the program of study concerned.

Study period concerned (as specified in the letter sent to the student)

- Fall (study period beginning between September 1 and December 31, 2011)
- Winter (study period beginning between January 1 and April 30, 2012)
- Other academic year (course start date and end date must be between July 1, 2011, and October 30, 2012)

If the dates indicated in the letter sent to the student are inaccurate, please specify the exact start and end dates of the courses in the space below.

Start date of courses Y M D

End date of courses Y M D

Program of study

Name of program of study or faculty

Code assigned by the Ministère

Specify the student's main activity during that period.

Bachelor's cycle	University Master's	Doctoral	College
<input type="checkbox"/> Full-time studies <input type="checkbox"/> Full-time practicum	<input type="checkbox"/> Full-time studies <input type="checkbox"/> Full-time practicum <input type="checkbox"/> Thesis or dissertation	<input type="checkbox"/> Full-time studies <input type="checkbox"/> Full-time practicum <input type="checkbox"/> Thesis or dissertation	<input type="checkbox"/> Full-time studies <input type="checkbox"/> Full-time practicum

Confirmation of attendance

Check the appropriate box below to specify the student's circumstances during the study period concerned and specify the date of withdrawal from courses, if applicable.

1. The student is or was registered for full-time studies.
2. The student withdrew from all his or her courses on Y M D
3. The student withdrew from one or more of his or her courses (but not all courses) on Y M D

I hereby certify that the information I have provided is accurate and complete.

Y M D

Signature of the authorized officer of the educational institution

