



Hardship Funds Request Form

Student			
Name _____	Home Phone: () _____	May we leave a message? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Student # _____	Cell Phone: () _____	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Email _____	Work Phone: () _____	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Address _____			
# and Street	City	Province	Postal Code
Employer _____			

Financial Budget for the current Academic year

Financial Statement			
Assets (What do you own)		Liabilities (What do you owe)	
	Value		Balance
Bank Account _____	_____	Loan _____	_____
Car _____	_____	_____	_____
Other _____	_____	Credit Card(s) _____	_____
_____	_____	Personal Debt _____	_____

Monthly Income		Monthly Expenses	
Assistance from parents _____	_____	Rent/Mortgage _____	_____
Spouse/Partner Net Income _____	_____	Utilities _____	_____
Employment _____	_____	Phone/Cable/Internet _____	_____
Band Funding _____	_____	Food _____	_____
Child Tax Benefit _____	_____	Clothing _____	_____
Child Care benefit _____	_____	Transportation _____	_____
Child Support/Alimony _____	_____	Medical/Dental _____	_____
Other (specify) _____	_____	Other (specify) _____	_____

Yearly Income		Yearly Expenses	
Monthly Income x _____ months _____	_____	Monthly Expenses x _____ months _____	_____
Savings _____	_____	Tuition and Fees _____	_____
Government Student Loan _____	_____	Books and Supplies _____	_____
Scholarships, Awards, Bursaries _____	_____	Other One Time Expenses _____	_____
Other (specify) _____	_____	Other (specify) _____	_____
Other (specify) _____	_____	Other (specify) _____	_____
Other (specify) _____	_____	Other (specify) _____	_____
(A)		(B)	

Shortfall: Total Income (A) - Total Expenses (B) \$

Please provide a brief description of why you require funds*

Amount Requested

Grant Transit Loan

Date which loan to be repaid

How do you plan to repay the financial assistance?

Questions

1. Are you currently receiving any financing from Student Loans? Yes No
2. Have you approached other sources of funding? Yes No
(Financial Aid & Awards, International Centre for Students, Other)
3. May we verify your academic standing? Yes No

4. Please outline any other details which would be useful for our consideration:

*** Documentation/Proof of Hardship may be required prior to disbursement of any funds**

I hereby apply for financial assistance from The University of Manitoba Students' Union (UMSU). I declare that all information herein provided is complete and true in every respect; that I shall be a student for the academic period; and the financial assistance is essential to enable me to continue my education. Furthermore, I am aware that the use of this assistance for any purpose other than those specified in this application, without the expressed written consent of UMSU will constitute a violation of this agreement, making this financial assistance due and payable to UMSU immediately, and will cause me to be ineligible for any other assistance from UMSU until these funds have been repaid. I understand that if payment is not made in full (in the case of a loan) by the promised date or if other arrangements have not been made with UMSU,

my student records, and agree to notify UMSU of any change in my academic status or my financial status during the period covered by this application.

UMSU and their representatives agree to treat any information provided to them through this application as confidential, and agree not to provide any information to any other party nor use the information for any purpose not expressly consented to above.

Applicant's Signature

Date

Office Use Only

Assistance Approved Yes No

Amount

UMSU Executive

Date