Canada

Appendix 3



INSTITUTION AND PROGRAM INFORMATION

PURPOSE

The institution and program information on Appendix 3 allows StudentAid BC to determine whether the programs for which students request funding are eligible in accordance with StudentAid BC policy.

WHO COMPLETES APPENDIX 3?

The Appendix 3 is required for students attending private training institutions in British Columbia (except Trinity Western University) or any institutions outside British Columbia.

NOTE

Instructions for your institution are printed on the other side of this page. Do not separate these pages before Appendix 3 has been completed by your institution official.

DEADLINE

- Completed Appendix 3 forms must be received at least six weeks before classes end.
- Incomplete Appendix 3 forms will delay processing of your application.
- Ensure all sections are completed before you submit your application to StudentAid BC.

SUBMISSION INSTRUCTIONS

Email completed Appendix 3 to SABC.AdminUnit@gov.bc.ca.

DOES MY SCHOOL HAVE TO BE DESIGNATED?

For your program of study to be eligible for StudentAid BC funding, your institution must be a designated institution authorized by British Columbia, and it must meet B.C. post-secondary education requirements.

All public universities, colleges and institutions in B.C. are designated; however, not all private training institutions or out of province institutions have been reviewed and designated by the Ministry of Advanced Education, Skills and Training.

Not all institutions choose to be designated. Before applying for StudentAid BC funding, you should confirm the institution's designation status at: www.StudentAidBC.ca

Note: To request your institution be designated, visit www.StudentAidbc. ca and read the Designation page for further information. The designation process may take several weeks to complete. Assistance through StudentAid BC cannot be considered before the institution is designated because funding is not retroactive.

SECTION A

All students who need Appendix 3 must complete Section A.

SECTION B

This section must be completed by staff at the financial aid office or the registrar's office of your institution. Take or mail your Appendix 3 to the institution you plan to attend. Check with the institution first to make sure you send the form to the right person.

SECTION C

If you are mailing your Appendix 3 form to your institution for completion, the institution's staff will return it to the address you have entered in Section C. An incomplete Appendix 3 will be returned to you and will delay processing of your application. Ensure that you have completed all sections before you submit your application to StudentAid BC.

INSTRUCTIONS TO ALL INSTITUTIONS:

IMPORTANT

continued on next page

- The completion of Appendix 3 DOES NOT confirm enrolment or registration in the program.
- Content is information only to assist StudentAid BC to determine the student's eligibility for financial assistance. You will be required to confirm enrolment at a later date.

INSTRUCTIONS TO ALL INSTITUTIONS

- The information you provide in Appendix 3 is necessary to determine the eligibility of the program and the student's financial need.
- It also determines the disbursement and negotiation dates for any assistance and the date the loan will go into repayment status.
- Ensure the mailing address listed is for the financial aid office or registrar's office at the institution, not the department or faculty address.
- Enter your institution code. To find program and institution codes visit www.StudentAidBC.ca
- Ensure your institution stamp or seal is used.
- It is not expected that students pay their fees before the institution completes this form.
- Department heads, faculty members and teaching staff DO NOT have authority to complete or sign this form.

B.C. PUBLIC INSTITUTIONS

Appendix 3 forms may only be completed by authorized financial aid staff. Submitted forms must bear the official FAO stamp.

Enter the program code.

B.C. PRIVATE INSTITUTIONS

This form must only be completed by staff at the institution who have signing authority as per their StudentAid BC designation agreement.

Enter the program code.

INSTITUTIONS OUTSIDE B.C.

This form must only be completed by financial aid or registrar's staff who have signing authority for student financial assistance purposes. Leave program code blank.

BREAKS IN STUDY

An institution break is a period of time during the delivery of a program when instruction is not offered. Breaks in full-time study are permitted as long as the combined break time does not exceed 10 per cent of the total study period for the program. No break can be longer than two consecutive weeks, with the exception of the calendar year-end break, which can be up to three weeks in length.

QUESTION 17 DATE CLASSES START

Enter first day of classes for the program of study in which the student is or will be registered.

Indicate the program of study in which the student is intending to start classes between August 1, 2019 and July 31, 2020.

Note: The program of study must be at least 12 weeks in length.

QUESTION 18 DATE CLASSES END

Enter the last day of classes or exams, whichever is later, for the program of study.

Note: If you are completing Appendix 3 to extend a study period end date (reassessment), enter the original study period start date on Question 17. The program of study cannot exceed 52 weeks in length.

QUESTION 20a PRIOR LEARNING ASSESSMENT (PLA)

Prior learning assessment (PLA) is an assessment process, not a formal course or program of study and, as a result, PLA is not eligible for StudentAid BC funding. Costs associated with the PLA process (e.g., the assessment) are not allowable costs; and, courses for which PLA credit has been granted may not be used to determine full-time enrolment for StudentAid BC purposes.

QUESTION 21 YEAR OF PROGRAM

Most programs have a standard length for completion. Indicate the year of the program the student will be in, not the total number of years the student has spent working towards completion of the program.

For example:

- i. If the program requires one year or less to complete, mark 1 in the box.
- ii. If the student is entering the third year of a four-year program, mark 3 in the box.

QUESTION 23 DISTANCE EDUCATION PROGRAMS

Students enrolled in studies via distance education, blended learning, online programs or other programs with a non-traditional form of delivery are required to submit the Confirmation of StudentAid BC Distance Education Eligibility form. Download the form at: www.StudentAidBC. ca. This form must be completed by the institution official and submitted to StudentAid BC with the required documentation.

QUESTION 24 PROGRAM TYPE

Indicate type of credential the student will receive upon successful completion of this program.

QUESTION 25a

Actual tuition fees only, do not include any other fee.

QUESTION 25b

Mandatory fees include registration fee, archiving fee, license exam fee, AMS/Student Society Fees, Association fees. Mandatory fees do NOT include local transportation, medical premiums or student license.

QUESTION 25c

Program related costs include actual books and supplies, kit, personal instruments or tools required for study/practice, computer equipment to a maximum of \$300 per year (software usage charges, repairs, etc.), clothing/uniform, safety equipment shoes/boots and other equipment rental (diving, aviation, photography, etc.).

QUESTION 25d

Exceptional expenses include compulsory trips, practicum costs and clinical experiences.

Please consult the StudentAid BC Policy manual available online at www.StudentAidBC.ca or contact StudentAid BC for further information.

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Appendix 3



INSTITUTION AND PROGRAM INFORMATION

SECTION A - STUDENT: COMPLETE SECTION 'A' (FRONT PAGE) AND 'C' (BA	CK BACE) ONLY
SECTION A - STUDENT. COMPLETE SECTION A (FRONT PAGE) AND C (BA	CR PAGE) ONLY
(01) STUDENT'S LAST NAME	(03) STUDENT'S SOCIAL INSURANCE NUMBER
(02) STUDENT'S FIRST NAME MIDDLE INITIAL	(04) STUDENT'S APPLICATION NUMBER
	2 0 1 9
	(05) STUDENT NUMBER (IF KNOWN)
SECTION B -TO BE COMPLETED BY AN OFFICIAL OF THE FINANCIAL AID O	FFICE OR REGISTRAR'S OFFICE ONLY
CECTION D TO BE COME EFFED BY AN OFFICIAL OF THE FINANCIAL AID C	
(06) INSTITUTION NAME	(AO) INSTITUTION CODE
	(09) INSTITUTION CODE
EMAIL OF FINANCIAL AID OFFICE OR REGISTRAR'S OFFICE	PROGRAM CODE
	Visit www.StudentAidBC.ca to find codes
(07) MAILING ADDRESS OF FINANCIAL AID OFFICE OR REGISTRAR'S OFFICE	
	OFFICIAL STAMP OR SEAL OF INSTITUTION
(08) MAILING ADDRESS OF FINANCIAL AID OFFICE OR REGISTRAR'S OFFICE	
	STAMP/SEAL HERE
(10) CITY/TOWN (11) POSTAL / ZIP CODE	
(12) PROVINCE/STATE TELEPHONE NUMBER (Financial Aid Office)	FAX NUMBER (Financial Aid Office)
	(
(13) COUNTRY (14) TYPE OF SCHOOL - MAR	KONE
A PUBLIC ACADEMIC B PRIV	ATE DEMIC C PUBLIC D PRIVATE NON-ACADEMIC D NON-ACADEMIC
(15) PROGRAM/FACULTY (16) MAJOR/DEPARTMENT (if:	
(17) DATE CLASSES START (18) DATE CLASSES END (19) TOTAL (20)	STUDENTS INTENDED (20a) PRIOR LEARNING
YEAR MONTH DAY YEAR MONTH DAY NOT TO EXCEED WEEKS	COURSE LOAD ASSESSMENT (PLA)
TO START DATE OF THIS APPLICATION PERIOD	% YES NO
(21) What year will the student be in (e.g., 1st, 2nd, 3rd, 4th, etc.)	YEAR
(22) How long is the program when taken at 100% including program breaks? (if less than 60 weeks, m	ark "1" in box) YEAR(S)
(23) Is this a distance education, blended learning or online program?	YES
CERTIFICATE/ ASSOCIATE/ UNIVERSITY CITATION DIPLOMA TRANSFER BACHELOR	UNCLASSIFIED/
(24) Program type (mark one box only)	MASTER DOCTORATE PROFESSIONAL UNCLASSIFIED/ QUALIFYING F G H
	E F G H
(25) Total costs: must be shown in Canadian dollars. (a) Actual tuition, do not deduct any sponsored tuition amount	(25a) \$
(c) Program related costs	` '
(d) Exceptional expenses	(25d) \$
(26) Student awards: must be shown in Canadian dollars.	(202)
(a) What is the total amount of merit-based scholarship(s) and needs-based bursaries the student will receive fi	rom your school (26a) \$
(27) SIGNATURE OF INSTITUTION OFFICIAL (IN INK) PRINT NAME	(28) DATE SIGNED
X	YEAR MONTH DAY
MUST BE SIGNED PRINT HEF	KE

FIRST NAME MAILING ADDRESS APT/SUITE STREET NUMBER AND STREET NAME/PO BOX Use this line for any part of your address not indicated above Use this line for any part of your address not indicated above CITY/TOWN PROVINCE/STATE POSTAL / ZIP CODE
FIRST NAME MAILING ADDRESS APT/SUITE STREET NUMBER AND STREET NAME/PO BOX Use this line for any part of your address not indicated above Use this line for any part of your address not indicated above CITY/TOWN
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PROVINCE/STATE POSTAL / ZIP CODE
COUNTRY
AREA CODE TELEPHONE NUMBER
E-MAIL ADDRESS