

STATEMENT OF FINANCIAL NEED

Name of Parent or Guardian: _____

Address: _____
No. Street Town/City Postal Code

Occupation: _____
Father Mother

Number of Dependents in Family: _____

If you are married: Name of Spouse _____ Occupation _____

Number of Applicant's Dependents (if any): _____

Have you worked during the past year? If so:

Name of Employer: _____

Type of Work: _____

Full Time Part Time Other: _____

Dates of Employment: _____ Income: _____

Amount of Debts: \$ _____ Monthly Payments: \$ _____

ESTIMATED EXPENSES FOR
FALL AND WINTER SEMESTERS

Fees:	\$ _____
Books:	\$ _____
Board & Room:	\$ _____
Recreation:	\$ _____
Transportation:	
To and from classes	\$ _____
Home to Regina and return	\$ _____
Other (specify): _____	\$ _____

TOTAL \$

METHODS OF FINANCING

Parents/Guardian:	\$ _____
Relatives/Friends:	\$ _____
Spouse:	\$ _____
Savings:	\$ _____
Student Loans:	\$ _____
Scholarships/Bursaries (itemize)	
_____	\$ _____
_____	\$ _____
_____	\$ _____
Other (specify): _____	\$ _____

TOTAL \$

Date of Application

Signature of Applicant