

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