STUDIES AT ANOTHER INSTITUTION	
Student name	Study Period
Student Number while at UWO	Faculty/Year
	ay recognize educational costs at another institution (within owards your University of Western Ontario degree.
In order to advise Student Financial Aid Office at W Financial Aid Office at the other institution comple	Vestern University of your courses and costs, please have the te the section below.
PLEASE NOTE: Tuition amounts owing to your other institution <u>cannot</u> be assigned from your OSAP funding processed through Western University. You will be responsible for making all payment arrangements with the other institution.	
Please Print Course Name(s) and Number(s) below:	
TO BE COMPLETED BY HOST INSTITUTION:	
% Course Load	# Weeks of Study
Tuition Fees Anc. Fees	Study Start DateStudy End Date
Book Costs	Institution Name & Address
Official Name Title	
Phone #	
Official's Signature:	Date:

**Please return this form to: Western University, Student Financial Aid, Western Student Services Building, Room 1100, London, Ontario, N6A 3K7. Fax (519) 850-2394.

The personal information on this form is collected under the authority of The University of Western Ontario Act, 1982, as amended. To view the complete Personal Information Collection Notice, visit the online Academic Calendar at: http://westerncalendar.uwo.ca/2015/pg5.html