SUMMER 2021 OSAP CHANGE FORM
(Please submit completed form to Student Central or the Financial Aid Office)

Last Name: ____________________________ First Name: ____________________________

Student ID: ____________________________ Faculty/Yr: ____________________________
(ie: SC4, AR2)

** Please only complete the sections that have changed from your original application. **

Change in SUMMER COURSES: (You must indicate ALL COURSES previously enrolled in and ALL COURSES currently enrolled in; this will allow us to properly assess your current course load). Please ensure you are registered and/or have dropped these courses before handing in this form.

<table>
<thead>
<tr>
<th>Previous Summer Course(s) and Session(s)</th>
<th>New Summer Course(s) and Session(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(ie: 1.0 Intersession)</td>
<td>(ie: .5 Intersession)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Change in GROSS (before taxes) SUMMER EARNINGS:

<table>
<thead>
<tr>
<th>Amount</th>
<th>Source of Income</th>
<th>Amount</th>
<th>Source of Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>May:</td>
<td></td>
<td>July:</td>
<td></td>
</tr>
<tr>
<td>June:</td>
<td></td>
<td>August:</td>
<td></td>
</tr>
</tbody>
</table>

Change in CIRCUMSTANCES:

Details of Change: (Should you wish to close your OSAP application, please submit a copy of your valid Government issued photo ID with this form.)

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Student Signature ____________________________ Date ______________

For office use only

Sent Online ____________________________ Initials ____________________________

Details of Change:
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

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