

2025 - 2026

Need Based Award Retention Application

DEADLINE DATE: JULY 18, 2025

Personal Data:

Last Name	First Name	Student Number
Citizenship: <input type="checkbox"/> Canadian citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Other (specify): _____		Home Province: <input type="checkbox"/> Ontario <input type="checkbox"/> Other (specify): _____
Status for the upcoming 2025/202 academic year: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time		For the upcoming 2025/202 academic year: What Faculty/program will you be registered in?

How do you intend to fund the majority of your expenses for the 2025-2026 academic year?

☐ Contribution from Spouse    ☐ Contribution from Parent(s)    ☐ Savings    ☐ Bank Loan/Line of Credit

☐ Scholarship/Award/Sponsorship    ☐ Other (please identify): \_\_\_\_\_

Date of Graduation from High School \*REQUIRED\*    (Month \ Year) \_\_\_\_\_ \ \_\_\_\_\_

**Note:** If you have been out of high school for less than six years parental information is required. If you are a sole support parent, or are married/common-law, Parental Information is not required, and you can enter “0” for these values. If your parents are separated or divorced and you have **not** been out of high school for six or more years, include only the income from the parent with whom you currently, or last, lived (and their current spouse, if they have remarried). Any support from the other parent must be included in the other income section in Study Period Resources. Married/common-law students must fill in the spouse’s Information. If your spouse is unemployed, include income from Government (if applicable). If your Spouse has no income, enter “0”. Spouse’s assets (such as vehicles, savings, stocks and bonds) are also the student’s assets.

Family Information:

Number of people in your family, including yourself (parents and siblings):		Number of dependents attending a post-secondary institution in 2025/2026, including yourself:		
Mother’s Occupation:_____  Self Employed: Yes <input type="checkbox"/> No <input type="checkbox"/>	Mother’s Gross income for 2024 Taxation year (Line 15000):	CPP Deductions (Line 30800 & 31000):	EI Deductions (Line 31200):	Income Tax Deductions (Line 43500):
Father’s Occupation:_____  Self Employed: Yes <input type="checkbox"/> No <input type="checkbox"/>	Father’s Gross income for 2024 Taxation year (Line 15000):	CPP Deductions (Line 30800 & 31000):	EI Deductions (Line 31200):	Income Tax Deductions (Line 43500):
Spouse’s Occupation:_____  Self Employed: Yes <input type="checkbox"/> No <input type="checkbox"/>	Spouse’s Gross income for 2024 Taxation year (Line 15000):	CPP Deductions (Line 30800 & 31000):	EI Deductions (Line 31200):	Income Tax Deductions (Line 43500):

It is essential that you make full and accurate disclosure of all relevant information about your resources and program costs. Failure to do so may result in sanctions under the Code of Student Conduct. If you have any questions about what information should be disclosed, you should contact the Registrar’s Office before submitting your application. Enter 0 (zero) for any field below that is not applicable to your situation.

Student Assets (enter \$0 if not applicable):

Amount in Accounts (savings, chequing etc (Balance of savings as of June 30, 2025. Do not include amount of Summer Savings – this will be considered below):		
Amount of <b>Investments</b> (e.g. GIC’s, Stocks, Bonds, TFSA, Bitcoin etc):		Amount of <b>RRSPs</b> (Registered Retirement Savings Plan):_____ Amount of RESPs (Registered Educational Savings Plan) to be used for academic year 2025-2026:_____
Do you have a vehicle (including lease) <input type="checkbox"/> Yes <input type="checkbox"/> No  *If you have a vehicle not owned/leased by you but you are the primary driver the answer to above question is Yes.	If yes, make and year:	If yes, Current Gross market Value of Vehicle:
Do you own a house? <input type="checkbox"/> No, I rent <input type="checkbox"/> Yes Mortgage Owning:\$_____	If yes, value (based on most current Property Assessment): \$	Address:

Financial Resources (enter \$0 if not applicable):

Are you applying for Government Student Loans for the 2025/2026 academic year		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Estimate* of 2025/2026 Government loans (OSAP, Out of Province)	\$		
Parental/family Contribution (ie. Rent payments, groceries, utilities, tuition payments, etc)	\$		
Anticipated UWO Scholarships & awards (include the awards you are applying for)	\$		
Anticipated Non-UWO Scholarships & awards (external awards/scholarships/sponsorships)	\$		
Spouse's contribution	\$		
<b>Windsor medical students:</b> What amount of total funding (scholarships, bursaries) are you receiving from Windsor?	\$		
Gross Income from Summer Employment	\$		
Net Income from Summer Employment	\$		
Estimated Summer Savings	\$		
Personal line of credit/Student Bank Loans (available for the 25/26 academic year)	\$		
Other Government Income (eg. UC, CPP)	\$		
Other expected income (specify sources)	\$		

\*An estimate of Canada Student Loan can be obtained by visiting: <https://osap.gov.on.ca/AidEstimatorWeb/enterapp/enter.xhtml>

Previous Educational Related Debt:

Do you currently have an <b>outstanding</b> bank loan or line of credit, relating to your education? If yes, how much in interest payments will you pay for the 25/26 Fall/Winter academic year?	<input type="checkbox"/> Yes <input type="checkbox"/> No \$ _____
What is the <b>outstanding not repaid</b> amount borrowed from Government Student Loans? ( <b>DO NOT</b> include amounts to be used for 2025/2026 academic year)	\$ _____
What is the <b>outstanding</b> amount borrowed from banks? ( <b>DO NOT</b> include amounts to be used for 2025/2026 academic year)	\$ _____

Please describe how you are spending your 2025 summer:

If estimated summer earnings is listed as \$0, explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please describe: How has this scholarship assisted you and how will it continue to assist you?

**Declaration - I have read and agree to the following:**

- 1. The information provided on this application is complete and accurate and I require additional funds to pursue my studies at Western University (herein, Western).
- 2. I consent to the use of personal information provided on this application or accompanying documentation, including my social insurance number, for the purpose of determining my eligibility for financial assistance.
- 3. All information provided in connection with this application is subject to audit and verification by Western. I consent to the disclosure of information on this application to the Ministry of Training, Colleges and Universities and any other source when necessary for audit and verification of the information provided. Documentation may be requested at a later date based on an audit.
- 4. If any information is found to be untrue, I agree to pay back any funds I have received as a result of this application.
- 5. The value of any bursary or award I receive will be applied to my student account.

**6. Financial Aid Profile Privacy Notice and Declaration**

The information on this form is collected under the authority of the *University of Western Ontario Act, 1982*, as amended, and is needed to process your application, and decide your eligibility for Work Study, bursaries and need-based awards. The Office of the Registrar may disclose designated information to government funding agencies. In addition, the Office of the Registrar may disclose to the award donor, who may use your information in publications associated with the bursary/award, and share with the appropriate Faculty, Department(s), and School(s) the following student personal information: name, address, biographical data, faculty, academic programs, and any other information that confirms eligibility for and receipt of a bursary or award. This information may also be published in a document prepared for donors and potential donors that lists recipients of donor-funded scholarships, awards, and bursaries. If you have any questions or concerns about the collection, uses, and disclosure of this information by the University, please contact the Office of the Registrar, Western Student Services Building Rm. 1120, Western University, London, ON, N6A 3K7, Tel: 519-661-2111, extension 87399.

7. I understand that if any information is found to be untrue or inaccurate, this application may be considered cancelled and any money received as a result will have to be returned. If additional financial resources (eg. sponsorships, external awards/scholarships, service medical agreements) become available after this application is signed, you must disclose the information to our office during the application process and if you are a successful recipient of this scholarship.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

Questions: **Norma Merino**  
nmerino@uwo.ca

**DEADLINE DATE: JULY 18, 2025**

**Submit complete application on-line via The DocDrop at**

<https://studentservices.uwo.ca/secure/oneexperience/docdrop>