2018-2019 OSAP CHANGE FORM - Fall/Winter

_______________________________  __________________________________
Student Name                      Study Period

_______________________________  __________________________________
Student Number                    Faculty/Year

REASON FOR REASSESSMENT:

1. Change in COURSE LOAD or FACULTY?
   Effective date of change: ________________
   New course load/New Faculty: ________________

2. Other (Please specify):
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

CHANGE IN INCOME:

If you need to make any income changes/updates on your 2018-2019 OSAP Application, please note these changes below.

UNDERGRADUATE STUDENTS: Do NOT include UWO scholarship, award or bursary funding.
GRADUATE STUDENTS: MUST report all income including scholarships, bursaries and awards, with the exception of the Ontario Graduate Scholarship (OGS). OGS is reported by Western on your behalf.

Details of income change:
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

REQUEST TO CLOSE OSAP APPLICATION:

☐ Please close my OSAP Application. You must attach a copy of your valid government issued photo ID.

_______________________________  Date
Student Signature

Please return this form to:
Western University - Student Financial Aid - Western Student Services Building - Room 1100
London, ON - N6A 3K7 - Tel. (519) 661-2100 - Fax (519) 850-2394

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Sent Online  Initials

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