

## OSAP & Letter of Permission Students

Laurier students taking courses on a Letter of Permission at another institution can apply for Ontario Student Assistance Program (OSAP) funding as long as they are registered in an OSAP eligible degree program and course(s) count towards your degree requirements at Laurier. Students cross-registered at the University of Waterloo will automatically have their University of Waterloo courses considered with their Laurier registration.

### STUDENT INSTRUCTIONS:

In order for this to be considered, the following information must be uploaded to your OSAP application: (in the Required Document section as “Optional Review” documents):

1. STUDIES AT OTHER INSTITUTION FORM (see page 2) completed by the Financial Aid office at the other school
2. PROOF OF COMPLETED REGISTRATION from the other school

Both of these items must be uploaded to your OSAP application at least 40 days prior to the study period end date on your full-time application.

## OSAP STUDIES AT OTHER INSTITUTION FORM

OSAP may consider educational costs at another institution IF the course(s) will be credited towards the student's degree at Wilfrid Laurier University.

**Student Instructions:** Upload this completed STUDIES AT OTHER INSTITUTION FORM and PROOF OF REGISTRATION AT OTHER SCHOOL to your OSAP Application. It is the student's responsibility to ensure all required information is submitted to their OSAP application at least 40 days prior to your application study period end date.

**STUDENT NAME:** \_\_\_\_\_ **LAURIER I.D.#** \_\_\_\_\_

**COURSE NAME(S) & NUMBER (S) - ACTUAL START & END DATES:**

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----- THIS SECTION MUST BE COMPLETED BY THE FINANCIAL AID OFFICE AT THE OTHER INSTITUTION -----  
Once completed, please return to the student.

Tuition Fees: \$ \_\_\_\_\_ Ancillary Fees: \$ \_\_\_\_\_ Books: \$ \_\_\_\_\_

Number of Weeks: \_\_\_\_\_ % of Course Load: \_\_\_\_\_

Faculty: \_\_\_\_\_

Are the above courses eligible for OSAP?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Institution Stamp:

Name of Institution: \_\_\_\_\_

Official's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Official's e-mail: \_\_\_\_\_ Date: \_\_\_\_\_