

## EXCHANGE STUDIES COVER SHEET

*\*This form should be submitted, to Enrolment Services, with your OSAP application supporting documents (if applicable)\**

### SECTION 1: TO BE COMPLETED BY STUDENT

|                            |                   |                        |                  |
|----------------------------|-------------------|------------------------|------------------|
| <b>SURNAME</b>             | <b>FIRST NAME</b> | <b>SIN</b>             | <b>STUDENT #</b> |
|                            |                   |                        |                  |
| <b>UTOR E-mail address</b> |                   | <b>FACULTY/COLLEGE</b> |                  |
|                            |                   |                        |                  |

### SECTION 2: TO BE COMPLETED BY STUDENT IN CONSULTATION WITH CENTRE OF INTERNATIONAL EXPERIENCE

| <b>NAME &amp; LOCATION OF HOST UNIVERSITY</b>           |            |          |             | <b>EXPECTED TERMS AT HOST UNIVERSITY</b> |                       |                      |
|---|------------|----------|-------------|--|-----------------------|----------------------|
|   |            |          |             |  |                       |                      |
| STUDY TERM  | Start Date | End Date | On Exchange | At U of T                                | GROSS INCOME EXPECTED | SOURCE(s) OF INCOME* |
| 1   |            |          |             |  |                       |                      |
| 2   |            |          |             |  |                       |                      |
| 3   |            |          |             |  |                       |                      |
| <b>GROSS INCOME EXPECTED DURING BREAK BETWEEN TERMS</b> |            |          |             | <b>SOURCE(s) OF INCOME ON BREAK*</b>     |                       |                      |
|   |            |          |             |  |                       |                      |

\*i.e. Scholarships, RESP, employment, etc.

If your income will come from more than one source  
please attach a letter of clarification

**DOCUMENTATION REQUIRED:** Proof of official academic dates from host university (calendar or website printout); if you are completing a self-designed program, please attach proof of your costs (such as a fee invoice)

**STUDENT SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

### SECTION 3: TO BE COMPLETED BY ENROLMENT SERVICES

| ITEM TO CHECK                | STATUS | ITEM TO CHECK             | STATUS |
|------------------------------|--------|---------------------------|--------|
| DATES ADJUSTED               |        | MSFAA PROCESSED           |        |
| LIVING AWAY COSTS CONSIDERED |        | CONFIRMATION OF ENROLMENT |        |
| STUDENT REGISTERED           |        | CONFIRMATION OF INCOME    |        |

### OSAP FUNDING STATUS (Enrolment Services only)

| STUDY TERM | FUNDING | STATUS |
|------------|---------|--------|
| 1          |         |        |
|            |         |        |
| 2          |         |        |
|            |         |        |
| 3          |         |        |
|            |         |        |

**ADDITIONAL NOTES / INSTRUCTIONS**