

CSAP Application

THIS AGREEMENT dated _____ / _____ / 20____
Month Day Year

BETWEEN

CSAP INC.
(hereafter called the "Creditor")

-and-

Name of Borrower, (hereafter called the "Applicant")

THIS AGREEMENT WITNESSES that in consideration of the Creditor making the loan or any part thereof to the Applicant, the Applicant agrees with the Creditor as follows:

1.0 CSAP (College Student Assistance Program) USER AGREEMENT

In order to apply for financial assistance under the College Student Assistance Program (hereinafter referred to as "CSAP"), you must first register and provide your personal information.

1.1 Collection, Use, and Sharing of your Personal Information

The Creditors are the sole owners of the information collected for this application. We only have access to/collect information that you voluntarily give to us. We will not sell or rent this information to anyone. We will not share your information with any third party(s) outside of our organization, other than as necessary to fulfill any requests you may have and/or to approve this application. You consent to your personal information being collected and can be exchanged with any authorized agents or third party(s) in order to administer CSAP. You agree that we may contact you via email in the future to tell you about specials, new products or services, or changes to this privacy policy.

1.2 Agreement/Consent

I, the Applicant, agree that:

- i. CSAP Inc. can disclose my Social Insurance Number, name, date of birth, and gender to Employment and Social Development Canada to verify that the personal information I have provided matches the personal information contained in the Social Insurance Register. This verification is solely for the purpose of confirming the accuracy of my identification information in the context of the creation or the subsequent update to my personal profile.
- ii. The information contained within my personal profile will be used as part of any CSAP application that I submit.
- iii. As I provide additional personal information in connection with a CSAP application, the information may be added to my personal profile.

2.0 Terms and Conditions for Updating Profile Information in your CSAP Account

I, the Applicant, agree that:

- i. I am responsible for updating my personal profile information (e.g., address change) or indicating that a change of existing information (e.g., name change) is required by requesting the change in writing to CSAP Inc., its agents, or other authorized third-party administrators.

Applicant Initials _____



- ii. I may be asked to provide documentation to CSAP Inc., its contractors, agents, or one of its authorized third-party administrators to support specific changes to information contained within my personal profile (e.g., name change).

I have read and give my consent to the indirect collection and disclosure of my personal information and also understand and agree to the terms and conditions outlined above.

Signature of Applicant: _____
Month/Day/Year

3.0 Loan and Interest

Loan Amount: \$ _____.

Term of Loan: _____ months Final Payment Date: _____
Month/Day/Year

Loan Interest: _____% Interest to be applied starting on _____
Month/Day/Year

Other Terms: _____

4.0 Basic Personal Information

Fill this page out carefully as some of this information is verified with the Social Insurance Number Registry to confirm your identity. Your first and last name must match the name on your Social Insurance Number (SIN) card.

First Name: _____

Last Name: _____

Date of Birth: _____ / _____ / _____ Gender: Male Female Other _____
Month Day Year

4.1 Identifiers

Your Social Insurance Number (SIN) is your unique identifier. You require a valid SIN in order to apply for CSAP. If you do not currently have a valid SIN, contact any Service Canada office for information on how to obtain one.

Social Insurance Number (SIN): _____

Applicant Initials _____

4.2 Contact Information

A permanent Canadian address is mandatory. If you do not have one, enter the address of a friend or relative living in Canada. Your mail will be sent to this address unless you provide a different address in the "Mailing address" section below.

Street Address: _____

Apartment/Suite/Unit: _____

City: _____, Ontario

Postal Code: _____

Phone Number (_____) _____ - _____

What is your current citizenship status?

Canadian Citizen Permanent Resident Other: _____

5.0 Campus Information

What is the location of the school you plan to attend: Mississauga Malton Brampton

Student ID: _____

What is the name of your program (e.g., Business, Accounting, PSW)? _____

What is the start and end dates of your study period?

Start: _____ End: _____
Month/Day/Year Month/Day/Year

Send all of my CSAP money to my college, so they can pay my tuition and compulsory fees.

Signature of Applicant

Month/Day/Year

6.0 Marital Status

Marital Status: Married Divorced Widowed Common Law Never Married

Do you have dependent children? No Yes, list names and ages of Dependent Children below

	Age
_____	_____
_____	_____
_____	_____
_____	_____

Applicant Initials _____

7.0 Credit Information **PROOF REQUIRED**

Have you ever filed for any of the following?

Debt Consolidation Date Filed: _____

Consumer Proposal Date Filed: _____

Bankruptcy Date Filed: _____

If you filed for a bankruptcy, are you currently discharged?

Yes Date of Discharge: _____

No Name of Trustee: _____

7.1 Change in Credit Status

As a Borrower to a CSAP loan, you agree to report any change(s) in your credit status as it may change from time to time. You agree to report any change(s) in your credit status to CSAP Inc., its agents, or other authorized third-party administrators under this Agreement within 7 calendar days from the date of the status change. Change(s) in credit status include application/filing for debt consolidation, consumer proposals, bankruptcy, or any other significant changes in your credit status or any other changes that may affect your credit worthiness.

8.0 Income and Assets – **PROOF OF INCOME REQUIRED**

Enter amounts in dollars only. If the amount is not applicable or negative, enter (0).

Total Income received last full calendar year: \$ _____

Total gross income from last year's Canadian Income Tax Return: \$ _____

If you have not yet filed a return, enter an estimate: \$ _____

9.0 Binding Effect

This Agreement shall be binding upon the Applicant, their respective legal representatives, heirs, successors, administrators, and assigns, provided however, that this Agreement shall not be assignable by you at any time.

10.0 Governing Law

The validity, construction and performance of this Agreement shall be governed and construed in accordance with the laws of Ontario.

11.0 Waiver of Rights

Any failure by either party to enforce the other party's strict performance of any provision of this Agreement will not constitute a waiver of its rights to subsequently enforce such provision or any other provision of this Agreement.

12.0 Confidentiality

I, the Applicant, acknowledge that all Information in this Agreement is strictly confidential and I agree that I shall not reveal or disclose to any person or entity, or use any Information at any time, except as expressly directed by CSAP Inc., CIMT College, its agents, or other authorized third-party administrators as related to this Agreement, or as may be required by law. I also acknowledge and agree, that my obligation of confidentiality under this Agreement is of indefinite duration and that I will never disclose any Information to any person or entity, except as expressly directed by CSAP

Inc., CIMT College, its agents, or other authorized third-party administrators as related to this Agreement, or as may be required by law.

13.0 Legal Advice

I, the Applicant, acknowledge and agree that I have, or have had the opportunity to obtain independent legal advice in connection with the execution of this Agreement and that I have read this Agreement in its entirety, understand its contents, and I am signing this Agreement freely and voluntarily, without duress or undue influence from any party.

14.0 Mediation

If any dispute occurs between the parties relating to the application, interpretation, implementation or validity of this Agreement, the parties agree to seek to resolve the dispute or controversy through mediation before pursuing any other proceedings. Any Party to the dispute may serve notice on the others of its desire to resolve a particular dispute by mediation. The mediator shall be appointed by Agreement between the Parties or, if the Parties cannot agree within five days after receipt of the notice of intention to mediate, the mediator will be appointed by the Creditor of this Agreement. The mediation will be held at a city of choice by the Creditor. The Parties agree to attempt to resolve their dispute at mediation. The costs of the mediator shall be shared equally by the Parties. If the dispute has not been resolved within thirty days of the notice of desire to mediate, any Party may terminate the mediation and proceed to Arbitration.

15.0 Arbitration

If any dispute arising between the Parties cannot be resolved through mediation as aforementioned, the Parties agree to resolve the dispute by arbitration using an Arbitrator as agreed between the Parties. If the Parties cannot agree within five days after receipt of the notice of intention to arbitrate, the arbitrator will be appointed by the Creditor of this Agreement. The parties agree that arbitration presents a fair opportunity to present their case and respond to the case of the other side. The arbitration shall be held at a city of choice by the Creditor and shall proceed in accordance with the provisions of the Arbitration Act, 1991, S.O. 1991, c. 17. Judgment upon the award rendered by the arbitrator may be entered in any court having jurisdiction.

16.0 Liquidated Damages

In any event that the Applicant does not comply with any mediated or arbitration agreement or the Parties cannot resolve any disputes under this Agreement by Mediation as described above, the parties agree that in the event that the Applicant fails to comply with any of the terms or provisions of this Agreement, the Creditor's damages would be uncertain and difficult (if not impossible) to accurately estimate because of the parties' inability to predict collection fees, legal fees, and other relevant factors. Accordingly, the Applicant agrees that any collection fees, legal fees or other costs assessed under this Agreement are not penalties but instead are intended by the parties to be, and shall be deemed, liquidated damages.

17.0 Entire Agreement

This Agreement constitutes the entire understanding between the Parties and supersedes any and all prior or contemporaneous understandings and Agreements, whether oral or written, between the parties, with respect to the subject matter herein. This Agreement can only be modified by a written amendment signed by the party against whom enforcement of such modification is sought.

18.0 Consents, Declarations and Signature of Applicant

Your personal information, including your Social Insurance Number (SIN), is provided in connection with an award of financial assistance, including any previous applications and/or financial assistance received, and CSAP Inc. to administer and/or finance the College Student Assistance Program. Administration includes: determining eligibility for financial assistance; verifying this application, including verifying the amounts and types of any other form of provincial

Applicant Initials _____



or federal government financial assistance; updating the Applicant's CSAP profile; paying the Applicant's financial assistance; verifying the Applicant's financial assistance, any relief granted from any payment the Applicant is required to make and any loan rehabilitation; considering any applications for review of determinations relating to financial assistance, eligibility for relief from any payment or loan rehabilitation; auditing the Applicant's file; assessing and collecting loans, overpayments, and repayments. Notwithstanding anything in this Agreement or any other loan document to the contrary, the Applicant and its Guarantor (if applicable), hereby accept joint and several liability hereunder in consideration of the financial accommodations to be provided by CSAP Inc., CIMT College, its agents, or other authorized third-party administrators under this Agreement, for the mutual benefit, directly and indirectly. The Applicant and the Guarantor, jointly and severally, hereby irrevocably and unconditionally accept, not merely as a surety but also as a co-debtor, joint and several liability with the Applicant, with respect to the payment and performance of all of the obligations, it being the intention of the parties hereto that all of the obligations shall be the joint and several obligations of the Applicant without preferences or distinction among them. If and to the extent that the Applicant shall fail to make any payment with respect to any of the obligations as and when due or to perform any of the obligations in accordance with the terms thereof, then in each such event, the Guarantor will make such payment with respect to, or perform, such obligation.

Signed this _____ day of _____,)
) _____)
) Name of Applicant)
)
 20_____, in the Province of Ontario,)
) _____)
) Signature of Applicant)
)
 in the City of _____,)
) By signing this document, the Applicant acknowledges that)
) approval of this application does not take effect until you)
) have received notice of such approval.)
)
)
) _____)
) Authorized Signature of Creditor)
)

19.0 Spouse information

This section must be completed by your spouse if you indicated that you are married or in a common-law relationship

First Name: _____ Last Name: _____

Spouse's Date of Birth: _____ Spouse's SIN: _____

Income reported by Spouse on last year's Canadian Income Tax Return: \$ _____
Please attach Tax Assessment

19.1 Spouse Address Same as Applicant Written below, if different from Applicant

Street Address: _____

Apartment/Suite/Unit: _____ City: _____, Ontario

Postal Code: _____ Phone: (_____) _____ - _____

Applicant Initials _____

19.2 Consents, Declarations and Signature of Spouse

Your personal information, including your Social Insurance Number (SIN), is provided in connection with the Applicant's application and award of financial assistance, including any previous applications and/or financial assistance received, and CSAP to administer and/or finance the College Student Assistance Program. Administration includes: determining eligibility for financial assistance; verifying this application, including verifying the amounts and types of any other form of provincial or federal government financial assistance; updating the Applicant's CSAP profile; paying the Applicant's financial assistance; verifying the Applicant's financial assistance, any relief granted from any payment the Applicant is required to make and any loan rehabilitation; considering any applications for review of determinations relating to financial assistance, eligibility for relief from any payment or loan rehabilitation; auditing the Applicant's file; assessing and collecting loans, overpayments, and repayments.

Signature of Spouse: _____

Month/Day/Year

Signature of Witness: _____

Month/Day/Year

20.0 Guarantor

This section must be completed by a Guarantor, if applicable.

First Name: _____ Last Name: _____

Guarantor's Date of Birth: _____ Guarantor's SIN: _____

Income reported by Guarantor on last year's Canadian Income Tax Return: \$ _____
Please attach Tax Assessment

Driver's License No.: _____

20.1 Guarantor Address

Street Address: _____

Apartment/Suite/Unit: _____ City: _____, Ontario

Postal Code: _____ Phone: (_____) _____ - _____

20.2 Guarantor Credit Information: PROOF REQUIRED

Have you ever filed for any of the following?

Debt Consolidation Date Filed: _____

Consumer Proposal Date Filed: _____

Bankruptcy Date Filed: _____

If you filed for a bankruptcy, are you currently discharged?

Yes Date of Discharge: _____

No Name of Trustee: _____

20.3 Change in Credit Status

Applicant Initials _____



As a Guarantor to a CSAP loan, you agree to report any change(s) in your credit status as it may change from time to time. You agree to report any change(s) in your credit status to CSAP Inc., its agents, or other authorized third-party administrators under this Agreement within 7 calendar days from the date of the status change. Change(s) in credit status include application/filing for debt consolidation, consumer proposals, bankruptcy, or any other significant changes in your credit status or any other changes that may affect your credit worthiness.

20.4 Consents, Declarations and Signature of Guarantor

Your personal information, including your Social Insurance Number (SIN), is provided in connection with the Applicant's application and award of financial assistance, including any previous applications and/or financial assistance received, and CSAP to administer and/or finance the College Student Assistance Program. Administration includes: determining eligibility for financial assistance; verifying this application, including verifying the amounts and types of any other form of provincial or federal government financial assistance; updating the Applicant's CSAP profile; paying the Applicant's financial assistance; verifying the Applicant's financial assistance, any relief granted from any payment the Applicant is required to make and any loan rehabilitation; considering any applications for review of determinations relating to financial assistance, eligibility for relief from any payment or loan rehabilitation; auditing the Applicant's file; assessing and collecting loans, overpayments, and repayments. Notwithstanding anything in this Agreement or any other loan document to the contrary, the Applicant and its Guarantor, hereby accept joint and several liability hereunder in consideration of the financial accommodations to be provided by CSAP Inc., CIMT College, its agents, or other authorized third-party administrators under this Agreement, for the mutual benefit, directly and indirectly. The Applicant and the Guarantor, jointly and severally, hereby irrevocably and unconditionally accept, not merely as a surety but also as a co-debtor, joint and several liability with the Applicant, with respect to the payment and performance of all of the obligations, it being the intention of the parties hereto that all of the obligations shall be the joint and several obligations of the Applicant without preferences or distinction among them. If and to the extent that the Applicant shall fail to make any payment with respect to any of the obligations as and when due or to perform any of the obligations in accordance with the terms thereof, then in each such event, the Guarantor will make such payment with respect to, or perform, such obligation.

Signature of Guarantor:

Month/Day/Year

Signature of Witness:

Month/Day/Year

Applicant Initials _____

Notes:

Office Use:

Information Verified with Proof of Documentation? Yes No
 Approved Not Approved (Reason)

FAO Notes:

Required Documents **** Must be Originals!** (do not photocopy)

Documentation is required to support the information that you entered in the application.

- i. Proof of Date of Birth
- ii. Proof of Citizenship
- iii. VOID cheque from Financial Institution
- iv. Government issued ID with Photo
- v. Proof of your Social Insurance Number (SIN)
Your Social Insurance card, or an official Government of Canada document that contains your Social Insurance Number (e.g., a Canada Pension Plan Statement of Contributions, or a Confirmation of Social Insurance Number from Service Canada).
- vi. Proof of Address: One of the following documents is also required
 - Purchase Agreement
 - Utility Bill
 - Bank Statement/Client Slip (Directly from Financial Institution)
 - Ontario Driver's License

One of the following documents is also required:

- vii. Canadian Passport
- viii. Citizenship Certificate
- ix. Permanent Resident
You must provide a copy of the front and back of your Permanent Resident Card. If you do not have one, provide a copy of one of the following documents:
 - Record of Landing
 - Confirmation of Permanent Residence
 - Verification of Status

If Married:

You must provide a copy of your marriage certificate or an affidavit signed by you and your spouse confirming the date of your marriage.

Deadline Date:

All required documents must be received by your financial aid office no later than 10 days before the start your study period; otherwise, your start date may be deferred to the next available start date.