

## **SUMMER 2021 OSAP CHANGE FORM**

Please return this form and all applicable supporting documentation to:

Jane Parker, Financial Aid Officer By Email: <a href="mjparker@huron.uwo.ca">mjparker@huron.uwo.ca</a> OR By Mail: Jane Parker, Financial Aid Officer

**Huron University College** 

1349 Western Road, London, ON N6G 1H3

		1549 Western Road, London, ON 100				
Last Name :			First Name :			
Student ID:			Email:			
** PI	ease only con	nplete the sections that h	ave chan	ged from you	r original application. **	
currently	enrolled in; this w	COURSES: (You must indicate vill allow us to properly assess you courses before handing in this f	ur current		v enrolled in and ALL COURSES ase ensure you are registered	
Previous Summer Course(s) and Session(s) (ie: 1.0 Intersession)				New Summer Course(s) and Session(s) (ie: .5 Intersession)		
Change	e in GROSS S	UMMER EARNINGS:				
	Amount	Source of Income		Amount	Source of Income	
May:			July:			
June:			August:			
Details o	e in CIRCUMS of Change: (Should ed photo ID with the	d you wish to close your OSAP a	pplication,	please submit a c	opy of your valid Government	
Studen	t Signature				Date	
For offic	e use on:ly					
Sent O	nline		Initials			
Details	s of Change					