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## OSAP Program Change Form

If you are changing programs between semesters or restarting your program within the same academic year, fill in the required information below and email the completed form to [financialaidoffice@loyalistcollege.com](mailto:financialaidoffice@loyalistcollege.com) for processing or questions.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Loyalist Student #: \_\_\_\_\_ Loyalist Email: \_\_\_\_\_

Current Program, Year and Semester: \_\_\_\_\_

New Program, Year and Semester: \_\_\_\_\_

**Other Changes to Application:** Income, bursary income, daycare costs, etc. for new term or program dates, especially if changing from September to April program to a January to August program. Please give a completed and detailed explanation; if more information is needed, we will reach out to you by email.

I have given complete and true information on this form and understand that I am responsible to promptly notify the Financial Assistance Office of any changes. I also understand that these changes may cause a reassessment.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_