



**Lakehead**  
UNIVERSITY

**Student Central**

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## **OSAP EXTENSION FORM- Spring/Summer Term**

### **Important Information:**

Use this form if you had a full-time OSAP application in the 2020 fall or 2021 winter term and want to extend your funding into the spring/summer term. If you did not have a full-time OSAP application form you will need to complete a new application for the Spring/Summer term at [ontario.ca/osap](http://ontario.ca/osap)

**Complete this form once you have registered for all of your courses.** You must resubmit another extension form with all of your spring/summer courses listed if you add another course later. It is best to submit your extension form before your courses begin. Submissions after the start of courses will be considered; however, funding may not be available due to the short course lengths and processing time.

Be as accurate as possible listing your income. Watch for the notice to update your income. It will come up quick!

Check your OSAP status online for your funding amount for the spring/summer study period. Any changes to your study period (add or drop courses) will be reflected in your assessment/funding amount.

To submit your extension form please email the form from your Lakehead email to [studentcentral@lakeheadu.ca](mailto:studentcentral@lakeheadu.ca) or drop off the completed form at Student Central. Feel free to stop in at Student Central and speak with a Student Central Professional if you have any questions.

NAME :

STUDENT #

LOCAL ADDRESS :

**All Courses Must Be Applicable to your Degree/Program.  
Additional Qualifying Educational courses are NOT eligible for OSAP funding.**

I request financial assistance for the following courses and sessions:

**SPRING SESSION**

**Example: Biology Basics**

**BIOL 1112-SA**

**May 1 – May 22**

Course Title	Course Number & Section	Course Start/End Dates

**SUMMER SESSION**

Course Title	Course Number & Section	Course Start/End Dates

What is the GROSS income you expect to earn between April 24, 2021 and the start of your Spring/Summer courses (**if applicable**): \$ \_\_\_\_\_

GROSS income while attending the Spring/Summer semester: \$ \_\_\_\_\_

Source of income is: \_\_\_\_\_

Would you like to receive grant funding only? ☐ YES ☐ NO

I will be residing with my parents during the Spring/Summer semester: ☐ YES ☐ NO **False information will result in repayment of OSAP assistance and/or denial of further funding.**

Signature:

Date (dd/mm/yy)

OFFICE USE ONLY

001 \_\_\_\_\_ 002 \_\_\_\_\_ SPS \_\_\_\_\_ SPE \_\_\_\_\_

TNF \_\_\_\_\_ CPF \_\_\_\_\_ BET \_\_\_\_\_ 550 \_\_\_\_\_ 555 \_\_\_\_\_ 620 \_\_\_\_\_ DE \_\_\_\_\_ Par. \_\_\_\_\_ SPInc \_\_\_\_\_