

**Financial Aid Office**

[The Service Hub - Seneca Customer Support Options](#)

Email: [theservicehub@senecapolytechnic.ca](mailto:theservicehub@senecapolytechnic.ca)



**Studies at Another Institution**



OSAP may consider educational costs at your other institution if the course(s) will be credited towards your diploma or certificate at Seneca College. Please attach a letter from the coordinator confirming the course(s) will be credited towards your current year program. **A copy of your registration form must also be attached.**

**PERSONAL INFORMATION (Must be completed by student)**

Surname/Family Name: \_\_\_\_\_

Given/First Name: \_\_\_\_\_

Student Number (Seneca College):

Student Number (other instituion):

	Other Institution Course Code	Other Institution Course Title	Start Date	End Date
1.				
2.				
3.				

**THIS SECTION MUST BE COMPLETED BY FINANCIAL AID OFFICE AT OTHER INSTITUTION**

Tuition Fees: \$ \_\_\_\_\_ Book Fees: \$ \_\_\_\_\_ Anciliary Fees: \$ \_\_\_\_\_

Number of Weeks \_\_\_\_\_ Percentage of Course Load: \_\_\_\_\_ % Are the above courses eligible for OSAP at your institution? YES  NO

Faculty: \_\_\_\_\_

Name of Institution: \_\_\_\_\_

Official's Name: \_\_\_\_\_

Official's Phone #: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Institution Stamp: \_\_\_\_\_