

Student Financial Services

Department of Workforce and Advanced Learning
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JOB SEARCH FORM

If you are unable to provide the minimum student/spousal contribution, you must demonstrate that you were actively seeking employment during your pre-study period. This may be done by providing five letters from potential employers or by completing this form. Potential employers' signatures must be on this form. This is to confirm that the above mentioned student/spouse applied for full-time employment (30-40 hours/week) during his/her work term.

Students' Name					Social Insuran	ce No.		
Date Applied		Name of Business		Telephone No.		itle of Officia se print)	al	Signature of Official
1.								
2.								
3.								
4.								
5.								
Declaration I declare that the information given on this form is correct to the best of my knowledge. I make this declaration knowing it is an offence under the Canada Student Financial Assistance Act and the PEI Student Financial Assistance Act to knowingly make false statements or misrepresentation in an application or other document or to willfully provide any false or misleading information.								
wilifully provide any	taise or m	isleading information.						
Date		Student's Signature (in ink)			Spouse's Signature (in ink)			
						Office Use O	nly	
						File No.		