



EARLY COMPLETION OF STUDIES NOTIFICATION

This notification is to be completed by the post-secondary institution's financial aid officer identifying a student who have received StudentAid BC funding for a particular study period and who have completed their study period early.

As the student is completing studies early, please complete the Institution and Program Information on the reverse of this form, indicating the revised study period end date. Please advise the student to complete an Appendix 7: Request for Reassessment to indicate any changes due to the reduced study period.

STUDENT'S APPLICATION NUMBER

STUDENT'S SOCIAL INSURANCE NUMBER

STUDENT'S LAST NAME

STUDENT'S FIRST NAME

MIDDLE INITIAL

INSTITUTION NAME

ORIGINAL STUDY END DATE

EARLY COMPLETION OF STUDY DATE

Ministry of Post-Secondary Education and Future Skills

StudentAid BC

Email: StudentAidBC@gov.bc.ca

Mailing Address:

PO Box 9173 Stn Prov Govt
Victoria BC V8W 9H7

Phone:

1-800-561-1818
(Toll Free in Canada / U.S.)
+1-778-309-4621
(Outside North America)

Courier Address:

c/o StudentAid BC
1st flr 835 Humboldt St
Victoria BC V8V 4W8

SIGNATURE OF INSTITUTION OFFICIAL SIGN HERE	DATE SIGNED <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> YEAR MONTH DAY
NAME OF INSTITUTION OFFICIAL PRINT HERE	PHONE NUMBER <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> AREA CODE NUMBER

INSTITUTION STAMP OR SEAL

StudentAid BC

