

OSAP Affidavit

I, {{Name}}, of {{Address}}, **MAKE OATH AND SAY:**

1. I was born on {{DOB}} in {{Location}}.
2. I am a {{Citizenship}}. I currently live at {{Address}}.
3. I am {{Marital Status}}.
4. I am biological, custodial and sole-supporting parent of the following children:

Name of Child

Child's Date of Birth

Name of Child

Child's Date of Birth

5. The above child(ren) will be living with me on a FULL-TIME basis during my study period at the above-mentioned address.
6. The purpose of this affidavit is for application to OSAP (Ontario Student Assistance Program).

I swear this Affidavit in support of an application for OSAP funding, and for no other unlawful or improper purpose.

SWORN / DECLARED BEFORE ME AT:

City/Town of _____
in the Province/State of _____
on the _____ of _____, 20_____

A Commissioner of Oaths / Notary Public
in and in the Province of Ontario

Signature of Student