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## **REQUEST FOR AN EDUCATIONAL ASSISTANCE PAYMENT (EAP)**

INSTRUCTIONS		
<ol> <li>Photocopies of the original documents are accepted and can be sent by fax at 418 651-8030, by email at info@universitas.ca or by regular mail to the address indicated above.</li> <li>Universitas reserves the right to request additional documents after reviewing the information received.</li> </ol>		
BENEFICIARY'S INFORMATION		
Last Name:	First Name:	
ID:	SIN:	
Agreement No.:	(one form per agreement)	
At the time of the request: I am a resident of Canada I am a resident of Quebec	I am not a resident of Canada $\Box$ I am not a resident of Quebec $\Box$	
In addition, a withholding tax will apply pursuant to the Inco	payment, the Canada Education Savings Grant (CESG) will not be paid to this beneficia ome Tax Act. ayment, the Quebec Education Savings incentive (QESI) will not be paid to this beneficio	
REQUEST FOR THE WITHDRAWAL OF AN EDUCATIONAL ASSISTA	NCE PAYMENT (EAP) FOR THE BENEFICIARY	
Please check one of the following options:		
□ <u>Full</u> withdrawal of the EAP □ Amount of	the EAP withdrawal: \$ (partial)	
Please send us <b>recent proof of enrolment</b> in a post-s We cannot process your EAP request without this pro-	econdary program of study (issued in the last 6 months). <u>oof.</u>	
Beneficiary's program of study (mandatory):		
	on file; it is important that your contact information be up-to-date. If you ne Customer Portal. Simply, visit UNIVERSITAS.CA and click on CUSTOMER PORT	
- You can then register or sign in to your a	ccount using <b>your 6-digit ID number.</b>	

IMPORTANT

I acknowledge that EAP amounts are taxable income within the meanings of the applicable tax legislation; such amounts must be reported when filing my income tax return for the year in progress.

I have read and understand the following: receiving an EAP from Universitas has no impact on an application for a student loan or grant from the **Government of Quebec.** In the province of Quebec, the amounts from an RESP are not considered in the income calculation used when reviewing applications for student loans and grants. If you reside in another province, you must refer to the student financial assistance programs in your province or territory to learn the applicable procedure.

I hereby certify that the supporting documents requested are **original documents** having undergone no modification, alteration or falsification. I accept that any act committed resulting in the falsification of such documents will be considered as a fraudulent act, and that Universitas Management Inc. will <u>take legal action</u> according to the significance of the damage suffered.

Beneficiary's signature

Date

Subscriber's signature (mandatory)

Date