Medical Residency Interest Relief Program Application

Student Financial Services,
Department of Workforce and Advanced Learning
PO Box 2000, Charlottetown, PE C1A 7N8
Phone (902) 368-4640 Fax (902) 368-6144

If you are in a medical doctor residency program and you currently have a PEI Student Loan, you may qualify for immediate interest relief for the duration of your required residency program. Please complete and return this form **by mail, fax, or in person** to Student Financial Services (contact information on reverse).

PLEASE PRINT

Name			**Social Insurance Number**	
Street Address			**Main Contact Number**	**Secondary (cell or work)**
City / Town	**Province**	**Postal Code**	**E-Mail Address**	
Secondary Contact Person (please do not list spouse)			**Secondary Contact Phone Number(s)**	
Name of Residency Program			**Name of Educational Institution**	
Major or Specialty			**Name of Hospital or Clinic**	
Length of Entire Program			**On what date will your entire residency program finish?**	

Declaration:

I consent to and authorize the disclosure and release by any person, individual, corporation, organization, credit reporting agency, or by any government or government agency (including but not restricted to any foreign, federal or provincial government, department or crown corporation), of any information or documents (including any personal information as defined in the *Freedom of Information and Protection of Privacy Act)* requested by the Province of Prince Edward Island for any purpose respecting the administration of financial assistance for my benefit by Student Financial Services of Prince Edward Island, or its successors.

I further consent to the Minister of Workforce and Advanced Learning for Prince Edward Island or his/her designate to release to any person, individual, corporation, organization or to any government or government agency (including but not restricted to any foreign, federal or provincial government, department or crown corporation), any information or documents (including any personal information as defined in the *Freedom of Information and Protection of Privacy Act)* requested by the Province of Prince Edward Island for any purpose respecting the administration of financial assistance.

I declare that the above information is correct to the best of my knowledge and should my academic standing or program change, I agree to notify Student Financial Services immediately.

I agree to allow Student Financial Services to collect additional information about me and exchange information about me with any level of government in Canada and its agencies, educational institutions, and financial institutions.

Date Applicant's Signature (please sign in ink)

Please See Reverse for Important Information Regarding your Application

PLEASE PROVIDE THE FOLLOWING DOCUMENTATION WITH YOUR APPLICATION:

√ Verification of enrollment in a residency program from your educational institution. Acceptable verification is a copy of your residency contract or a letter from your program administrator. **Please ensure the start and end dates of the entire program are specified**.

√ **Written v**erification of your Canada Student Loan Balance. Please visit www.canlearn.ca to create an online account where you can print off your loan balance and submit it with your Medical Residency Interest Relief application.

√ Student Financial Services will accept your application by fax, mail, or in person.

PEI Student Financial Services Information:

Mailing Address:
Student Financial Services
Department of Workforce and Advanced Learning
PO Box 2000, Charlottetown, PE, C1A 7N8

Phone: **(902) 368-4640**
Fax: **(902) 368-6144**

Office Location:
Atlantic Technology Centre
176 Great George Street, Suite 212
Charlottetown, P.E.I.

Website: **www.studentloan.pe.ca**
E-mail: **studentloan@edu.pe.ca**

Lender Contact Information:

Mailing Address:
Edulinx-PEI
P.O. Box 1008, Station B
Mississauga, ON L4Y 3W3
1-877-560-1389

National Student Loan Service Centre
PO Box 4030,
Mississauga, ON L5A 4M4
1-888-815-4514
www.canlearn.ca

All personal information is collected under the authority of Section 31(c) of the Prince Edward Island *Freedom of Information and Protection of Privacy Act RSPEI 1988 Cap.*F-15.01 and the Canada Student Financial Assistance Act and Regulations, as it relates directly to and is necessary for the administration of the Prince Edward Island Medical Residency Interest Relief Program and will be used for the determination of financial assistance and for the purposes of determining and verifying eligibility, entitlement for, and the general administration and enforcement of this program. If you have questions regarding the collection of information please contact the Financial Awards Officer with Student Financial Services at PO Box 2000, Atlantic Technology Centre, 176 Great George Street, Suite 212,Charlottetown, PE C1A 7N8. Telephone: (902) 368-4640, Fax (902) 368-6144.