Student Financial Services
Department of Innovation and
Advanced Learning
PO Box 2000
16 Fitzroy Street
Charlottetown, PE C1A 7N8
Tel: 902 368-4640
www.studentloan.pe.ca

2009 - 2010

Estimate of Parental Income

Office Use Only
File Number
Date Received

Student's Social Insurance Number

Student's Name | Telephone Number

Address | City | Province | Postal Code

If you, as parents, anticipate your income being **lower by at least 5%** in 2009, indicate your income from all sources and give a complete explanation. If your son/daughter receives an overpayment as a result of you underestimating your income, this over-payment may be deducted from future loans.

	Jan 1/09 - Dec 31/09 Parent 1	Parent 2
Gross Income		
Employment	$	$
Employment Insurance		
Investments/Savings		
Pension Benefits		
Specify:		
Sick Leave Benefits		
Other Sources		
Specify:		
Self-Employment Income		
Specify Type of Income:		
Gross: $	**Net:**	
Total Income 2009	$	$

Explanation (be specific):

Declaration: I declare that the information submitted on this form is correct to the best of my knowledge and should my financial resources change, I agree to notify Student Financial Services immediately. I make this declaration knowing that it is an offence under the Canada Student Financial Assistance Act to knowingly make false statement or misrepresentation in an application form or other document or to wilfully provide any false or misleading information.

Date **Parent 1's Signature**

Date **Parent 2's Signature**