



**(If neither parent is the legal guardian, enter the guardian’s name and address and state the relationship to the applicant.)**

**Father / Guardian:**

**Mother / Guardian:**

\_\_\_\_\_  
Surname / Given Names

\_\_\_\_\_  
Surname / Given Names

**Home Addresses (Street, City, Province, Postal Code)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Telephone Numbers (including area codes):**

Home: \_\_\_\_\_

Home: \_\_\_\_\_

Office: \_\_\_\_\_

Office: \_\_\_\_\_

Fax: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

**Occupation**

\_\_\_\_\_

\_\_\_\_\_

**Employer’s Name and Address (Street, City, Province, Postal Code)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Total Family Income**

Indicate the total of all sources of income for the previous year and anticipated amount for the current year. Please provide a copy of the previous year’s tax return or notice of assessment for the parents/guardians of the applicant.

	<i>Previous Year</i>	<i>Current Year</i>
<i>Employment Income:</i>	\$ _____	\$ _____
<i>Business/Professional Income:</i>	\$ _____	\$ _____
<i>Other (please specify):</i>	\$ _____	\$ _____

**Other Information:**

**Number of children and other dependents:** \_\_\_\_\_

Indicate any other children or dependents of Parents/Guardians attending other educational institutions. Please give names, ages and name of school being attended.

<i>Name</i>	<i>Age</i>	<i>Name of School (if applicable)</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please indicate below any extenuating circumstances or additional expenses that you feel should be considered.

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Once application is completed, please forward to the address below in an envelope marked **Private & Confidential** to:

Mr. Ian W. Whitcomb, CA  
 Deloitte & Touche LLP  
 P.O. Box 6549  
 44 Chipman Hill  
 Saint John, New Brunswick  
 E2L 4R9