

Exchange Program Information Form

Please use this form if you are a student applying for OSAP for the academic year that you plan to go on exchange.

Checklist:

$oxedsymbol{\square}$ Submit a Full-Time OSAP Application

- Select McMaster University as your host exchange institution.
- Select your program and level according to your enrollment.
 - Please note: your study period information will be adjusted to reflect the information provided on the attached form and the required supporting documentation from your host exchange institution.
- Apply early to allow for enough time to process your application prior to your departure.
- All OSAP funding will deposited into your McMaster 'Student Account' to pay your tuition and student fees. You are responsible for paying any outstanding balance on your account. Any remaining funding after your fees are paid will be deposited to your personal bank account 5 7 business days after your OSAP Confirmation of Enrollment is processed.
- Check your McMaster 'Student Account' and OSAP status regularly.
- Visit our website for more information.

Monitor your OSAP application for updates.

Complete all sections of the Exchange Program Information Form
Upload the completed form and proof of study period start and end dates from the host exchange institution to your OSAP application
 Deadline Date: 40 days before your study period end date
Next steps: • Forms will be processed within 3-5 business days.







Exchange Program Information Form for OSAP Applicants

OSAP applicants complete this form and attach documentation - IN ENGLISH - from the host exchange institution, verifying your study period start and end dates for each term you are studying abroad.

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Last Name		First Name		
McMaster Student ID Number				
Study Period Information	l			
Exchange Institution		Exchange Location		
TERM	START DATE DAY/MONTH/YEAR	END DATE DAY/MONTH/YEAR	STUDY LOCATION FOR EACH SEMESTER	
FALL TERM 2025			At McMaster University At Exchange Institution	
WINTER TERM 2026			At McMaster University At Exchange Institution	

The information gathered on this form is collected under the authority of the McMaster University Act, 1976. The information is used for the academic, administrative, financial and statistical purposes of the University including, but not limited to, admissions; registration and maintaining records; awards and scholarships; convocation; provision of student services; including access to information systems; alumni relations; and disclosure to or on behalf of the applicable McMaster student government. This information is protected and is being collected pursuant to section 39(2) and section 42 of the Freedom of Information and Protection of Privacy Act of Ontario (RSO 1990). Questions regarding collection or use of this personal information should be directed to Student Services, Gilmour Hall, Room 108.







Financial Information

Please ensure that all income fields are completed with your total gross income already received OR amounts estimated to be received OR ZERO. Form will not be accepted if any fields are left blank.

Note: WEPP government income, Child Support & Spousal Support received during your study period MUST BE REPORTED in the table below under "All Other Income."

ALL FIELDS ARE REQUIRED. IF THERE IS NO VALUE TO ENTER FOR A FIELD, PLEASE ENTER A VALUE OF NIL OR \$0.

INCOME DURING	Fall Term	Winter Term	Spring/Summer Term
STUDY PERIOD	September - December	January - April	May - August
Government Income (Source E.g.: ODSP, Ontario Works, EI, WSIB, CPP etc.) *Do not include OSAP amounts	\$ Source:	\$ Source:	\$ Source:
McMaster Scholarship	\$	\$	\$
McMaster Bursary	\$	\$	\$
Ontario Graduate Scholarship (OGS)	\$	\$	\$
McMaster dependent/spouse bursary	\$	\$	\$
Other scholarship/bursary	\$	\$	\$
Employment Gross Income (Including Graduate TA & Residence Life CA Income)	\$	\$	\$
Co-op Work Placement Gross Income (Enter amount to be received during each 4-month work term)	\$	\$	\$
All Other Income (e.g. WEPP, child support,	\$	\$	\$
spousal support, rental income, investment income etc.)	Source:	Source:	Source:

Accommodation –	Sept – Dec 2025	Jan – April 2026	May – Aug 2026
Select the option	☐ Residing with parents	☐ Residing with parents	☐ Residing with parents
that applies to you	☐ Not residing with parents	☐ Not residing with parents	☐ Not residing with parents

Child Care Costs (if you	Sept – Dec 2025	Jan – April 2026	May – Aug 2026
have dependent children	\$	\$	\$
under the age of 12)			

DECLARATION & SIGNATURE

I declare that I have read this application in its entirety and have given complete and true information; including all income received or to be received during each of my work and study periods from all sources including government funding assistance. Should any of the information recorded on this form change, I will promptly notify Student Services at McMaster University in writing.

Student Signature:		Date:	
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