



Nunatsiavut Government – EDUCATION DIVISION

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Rental/Mortgage Support Request Form

Student Name: _____	Program: _____
Student #: _____	Institution: _____
Primary Email Address: _____	Phone #: _____
Living Arrangements (while in training): Check one box per semester:	Mailing Address (while in training): _____ City/Town: _____ Province: _____ Postal Code: _____
<input type="checkbox"/> renting/boardings <input type="checkbox"/> living with parents <input type="checkbox"/> campus residence apartment <input type="checkbox"/> own home	

Is this the same address as last semester?

☐ Yes ☐ No

Will you be claiming Set-Up Allowance?

☐ Yes ☐ No

Will you have **roommates** while you are in training?

☐ Yes ☐ No

Please list roommates (if applicable):

(1) _____

(2) _____

(3) _____

Do you have any **dependents**? ☐ Yes ☐ No

Please list dependents: (1) _____

(2) _____

(3) _____

(4) _____

Will any dependents be residing with you while you are in training?

☐ Yes ☐ No

If yes, how many will be residing with you while you are in training? _____

Total Rent/Mortgage Costs per month: _____

Your share of the Rent/Mortgage: _____

Attached Required Documents: ☐ Full rental agreement/lease

☐ Rental Agreement Letter

☐ Student Occupancy Agreement (for campus apartments only)

Lease Start Date: _____

End Date: _____

Students must submit proof of rent/mortgage with this request form. All documents must be signed & dated by the student/tenants & landlord and must include start and end date of agreement, additional roommates and monthly rental cost. If there is no rental/lease agreement, a letter outlining the required information listed signed by yourself, landlord/renter and be notarized (signed by Commissioner for Oaths/Justice of the Peace) is acceptable.

*Student Signature: _____

Date: _____

For office use only:

Proof of Rent/Mortgage Received: ☐ Yes ☐ No

Approved: ☐ Yes ☐ No Amount Approved: _____ From: _____ to _____

Set-Up Approved: ☐ Yes ☐ No **Extension approved:** ☐ Yes ☐ No **From:** _____ **to** _____

Signature: _____ Date: _____

Financial:

Entered by: _____ Date: _____

Funding Allocation: ☐ PSSSP ☐ ISETP (☐ EI ☐ CRF) ☐ IPSE