

# Application form for an exemption from differential tuition fees

## APPENDIX II

Please send this form, completed and signed, to the authority in your country that manages exemptions. Please note that forms submitted directly to the Ministère de l'Éducation, du Loisir et du Sport du Québec by students will not be processed.

The information below is required under the cooperation agreement on education and training between the Québec government and the government of (**partner**) concluded on (**date**) with regard to the granting by Québec of exemptions from differential tuition fees to students from (**partner country**).

### 1 – Identification

First name:	Name:
Date of birth (yyyy-mm-dd):	Nationality:

### 2 – Address in Québec

Number, street and city:	Postal code:
Telephone:	E-mail:

If you cannot provide a fixed address in Québec when you complete this form, you must send it to the authority in your country that manages exemptions as soon as you have one.

### 3 – Educational program in Québec for which the exemption

Name of the educational institution:
Full name of the program:
Program level:
Date of beginning of program (yyyy-mm-dd):

Please enclose a **copy of your confirmation of admission to a diploma program in an institution of higher education in Québec as well as an attestation to your registration in that program for the semester preceding your application.**

Under sections 64 and 65 of the *Act respecting access to documents held by public bodies and the Protection of personal information* (R.S.Q. c. A-2.1), the categories of persons who will have access to the information are those responsible for the program at the Ministère de l'Éducation, de l'Enseignement supérieur et de la Recherche. This information will be transmitted to the educational institution you will be attending for the duration of your studies in Québec. At the end of your studies, this information will be disposed of within the time limit specified in the *Archives Act*.

### 4 – Declaration and signature

I declare that the information provided on this form is accurate and complete.

Signature:	Date (yyyy-mm-dd):
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