

Medical Certificate

2027 (1 of 2)

This form must be filled out by a physician. It concerns students who have completed or temporarily interrupted their studies and who are experiencing difficulty repaying the student loan debt they contracted under the Loans and Bursaries Program or the Loans Program for Part-Time Studies due to a health condition.

Before submitting this form to your physician, please read the "General Information" section carefully and then fill out Sections 1 and 4.

Please submit ths fully-executed form by uploading it right into your online file.

Section 1 – Patient Information	
Last compa	Democratic de code de la
Last name	Permanent code assigned by the Ministère
First name Date of birth	Social insurance number
Number Street	Direction (North, South, East, West)
Apartment Municipality	
Municipality (cont.) Province Postal code	Telephone number (home)
	Area code
	telephone number
Area coo	de Extension
If you answered NO, indicate: • the type of disability: Temporary Permanent	
• the type of disability:	
• the extent of the disability: Light Moderate Serious	, Y , M , D
date when the disability began:	
• if the disability is temporary, date when the disability is expected to end:	Y M D
Diagnosis	
Has the person been hospitalized?	Yes No
Y M D Y M	D
If yes, indicate when: from to	
Comments:	

Permanent code assigned by the Ministère		2027 (2 of 2
Section 3 – Physician Identification and Signature		
Please provide the requested information (in block letters).		
Last name:	First name:	
Physician licence number:	Telephone number:	
Address of office:		
	Date	
Signature X	1	Y M D
Section 4 – Patient's Authorization and Attestation		

I authorize the physician named in Section 3, any other physician and any other accredited representative of a hospital or of any other organization involved to provide Aide financière aux études with all relevant information concerning the disability described in this form. I certify that the above information is accurate and complete.

Aide financière aux études reserves the right to verify the information you provide on this form.

Section 5 - General Information

If you have completed your studies and wish to inform Aide financière aux études that you are experiencing difficulty repaying your student loan debt due to a health condition, you must have this form filled out and signed by a physician. This medical certificate must be submitted with either the *Financial Statement* form or the *Application to Postpone the Repayment of a Student Loan Debt During a Temporary Interruption of studies*. You can obtain these forms by downloading them on the Quebec.ca/student-financial-assistance website or by calling Aide financière aux études at 418-643-3750 (Québec), 514-864-3557 (Montréal) or 1-877-643-3750 (toll-free elsewhere in Canada and the United States).

Fees

You are responsible for paying the fee charged by the doctor for providing the medical certificate.

Students With a Major Functional Disability

A major functional disability is defined as a permanent functional impairment that limits the person's ability to pursue his or her studies, and it must be diagnosed by a health professional. If you are pursuing studies and wish to inform Aide financière aux études that you have a major functional disability, you must use the form *Medical Certificate - Major Functional Disabilities and Other Recognized Disabilities*, which is available at the financial assistance office of secondary, college and university level educational institutions and on the Quebec.ca/student-financial-assistance website.