

This form is to be used by students to report a change in circumstances or apply for a training support allowance. It is essential that applicants submit all required documents related to each change in circumstances.  
Forms identified by an asterisk in Section 2,3 and 4 are available in "Loans and Bursaries for full-time studies" of our Web site ([www.quebec.ca/en/education/student-financial-assistance](http://www.quebec.ca/en/education/student-financial-assistance)).

Reserved to Aide financière aux études

**Section 1 – Student information**

Last name <input type="text"/>	Permanent code assigned by the Ministère <input type="text"/>
First name <input type="text"/>	Date of birth Y M D <input type="text"/>

**Section 2 – New marital status**

Current marital status	Date of change	Required documents						
<input type="checkbox"/> Married	<table border="0"> <tr><td>Y</td><td>M</td><td>D</td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> </table>	Y	M	D	<input type="text"/>	<input type="text"/>	<input type="text"/>	<ul style="list-style-type: none"> <li>Your marriage certificate</li> <li>The Declaration of Spouse – Loans and Bursaries Program form*</li> </ul>
Y	M	D						
<input type="text"/>	<input type="text"/>	<input type="text"/>						
<input type="checkbox"/> Living in a civil union	<table border="0"> <tr><td>Y</td><td>M</td><td>D</td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> </table>	Y	M	D	<input type="text"/>	<input type="text"/>	<input type="text"/>	<ul style="list-style-type: none"> <li>Copy of your civil union contract or certificate issued by the Registrar of Civil Status</li> <li>The Declaration of Spouse – Loans and Bursaries Program form*</li> </ul>
Y	M	D						
<input type="text"/>	<input type="text"/>	<input type="text"/>						
<input type="checkbox"/> De facto separated	<table border="0"> <tr><td>Y</td><td>M</td><td>D</td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> </table>	Y	M	D	<input type="text"/>	<input type="text"/>	<input type="text"/>	<ul style="list-style-type: none"> <li>Family Status Declaration form*</li> </ul> <p><b>AND</b>, if not already provided and you were married: Your marriage certificate, act of marriage or Certificate of civil status</p> <p><b>AND</b>, if not already provided and you were in a civil union with another person: A copy of the act or Certificate of civil union</p>
Y	M	D						
<input type="text"/>	<input type="text"/>	<input type="text"/>						
<input type="checkbox"/> De facto or legally separated	<table border="0"> <tr><td>Y</td><td>M</td><td>D</td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> </table>	Y	M	D	<input type="text"/>	<input type="text"/>	<input type="text"/>	<ul style="list-style-type: none"> <li>Separation judgement (marriage)</li> <li>Judgement dissolving your civil union or notarized declaration of dissolution of your civil union or Certificate of civil status confirming the dissolution of your civil union (applicable to civil unions)</li> </ul> <p><b>AND</b>, if you are the parents of one or more children:</p> <ul style="list-style-type: none"> <li>Copy of contractual agreements or accessory measures regarding child custody if not stipulated in the separation judgement or confirmation of dissolution of civil union.</li> </ul>
Y	M	D						
<input type="text"/>	<input type="text"/>	<input type="text"/>						
<input type="checkbox"/> Divorced	<table border="0"> <tr><td>Y</td><td>M</td><td>D</td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> </table>	Y	M	D	<input type="text"/>	<input type="text"/>	<input type="text"/>	<ul style="list-style-type: none"> <li>Divorce decree or certificate</li> </ul> <p><b>AND</b>, if you are the parents of one or more children:</p> <ul style="list-style-type: none"> <li>Copy of contractual agreements or accessory measures regarding child custody if not stipulated in the divorce decree or if the divorce certificate was submitted.</li> </ul>
Y	M	D						
<input type="text"/>	<input type="text"/>	<input type="text"/>						
<input type="checkbox"/> Widowed	<table border="0"> <tr><td>Y</td><td>M</td><td>D</td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> </table>	Y	M	D	<input type="text"/>	<input type="text"/>	<input type="text"/>	<ul style="list-style-type: none"> <li>Death certificate of the spouse</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>Act of burial or cremation</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>Burial permit</li> </ul> <p><b>AND</b>, if not already provided and you were married: Your marriage certificate, act of marriage or Certificate of civil status</p> <p><b>AND</b>, if not already provided and you were in a civil union with another person: A copy of the act or Certificate of civil union</p>
Y	M	D						
<input type="text"/>	<input type="text"/>	<input type="text"/>						

## Section 3 – New family situation

Family situation	Date of change	Required documents															
A: <input type="checkbox"/> I am a biological or adoptive parent.	<table border="1"><tr><td>Y</td><td>M</td><td>D</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table>	Y	M	D													<ul style="list-style-type: none"> <li>Birth certificate or act of birth that mentions the last names of the child's parents</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>Court-approved adoption decree</li> </ul>
Y	M	D															
B: <input type="checkbox"/> I am a single parent. (If applicable, fill out Declaration 3E.)	<table border="1"><tr><td>Y</td><td>M</td><td>D</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table>	Y	M	D													<ul style="list-style-type: none"> <li>Birth certificate or act of birth that mentions the last names of the parents of the child or children, if these documents are not on file with <i>Aide financière aux études</i></li> </ul> <b>AND THE</b> <ul style="list-style-type: none"> <li><i>Family Status Declaration</i> form*</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>Court judgement specifying that you have custody of the child or children</li> </ul> <b>AND</b> <ul style="list-style-type: none"> <li><i>Student's Dependent Children – Schedule A*</i> of the application for financial assistance</li> </ul>
Y	M	D															
C: <input type="checkbox"/> I am no longer a single parent. (If not due to marriage or civil union but because you are now living in a de facto union with a partner, fill out Declaration 3D also.)	<table border="1"><tr><td>Y</td><td>M</td><td>D</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table>	Y	M	D													<ul style="list-style-type: none"> <li>The <i>Family Status Declaration</i> form* if you are no longer a single parent because you no longer have custody of your child or children</li> <li>If you are no longer a single parent due to the death of your child or children, the death certificate(s), act(s) of burial or cremation or burial permit(s).</li> <li>Documents mentioned in 3D, if because you have begun to live as though married with a partner</li> </ul>
Y	M	D															
D: <input type="checkbox"/> I am living in a de facto union with a partner and a child is living with us.	<table border="1"><tr><td>Y</td><td>M</td><td>D</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table>	Y	M	D													<ul style="list-style-type: none"> <li><i>Declaration of Spouse – Loans and Bursaries Program</i> form*</li> </ul> <b>AND</b> <ul style="list-style-type: none"> <li><i>Student's Dependent Children – Schedule A*</i> of the application for financial assistance</li> </ul> <b>AND</b> <ul style="list-style-type: none"> <li>Birth certificate(s) or act(s) of birth of all children that live with you that include parents' last names if these documents are not on file with <i>Aide financière aux études</i></li> </ul> <b>AND, (if applicable)</b> <ul style="list-style-type: none"> <li>Legal document confirming that you have custody of the child</li> </ul>
Y	M	D															
E: <input type="checkbox"/> I am no longer living in a de facto union. (If not due to marriage or civil union, fill out Section 3B below as applicable.)	<table border="1"><tr><td>Y</td><td>M</td><td>D</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table>	Y	M	D													<ul style="list-style-type: none"> <li>The <i>Family Status Declaration</i> form if not due to marriage or civil union or if you are not a single parent</li> </ul>
Y	M	D															
F: <input type="checkbox"/> I have reached my 20 <sup>th</sup> week of pregnancy.	<table border="1"><tr><td>Y</td><td>M</td><td>D</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table>	Y	M	D													<ul style="list-style-type: none"> <li>You will need to submit the infant's birth certificate later on.</li> </ul>
Y	M	D															
G: <input type="checkbox"/> I have given birth to a child. (If applicable, you need to also fill out Section 3B or 3D.)	<table border="1"><tr><td>Y</td><td>M</td><td>D</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table>	Y	M	D													<ul style="list-style-type: none"> <li>Birth certificate or act of birth that include the last names of both parents of the child</li> </ul>
Y	M	D															
H: <input type="checkbox"/> I have a newly dependent child or ___ children. (If your situation is as described in Section 3G, you do not need to fill out this section.)	<table border="1"><tr><td>Y</td><td>M</td><td>D</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table>	Y	M	D													<ul style="list-style-type: none"> <li><i>Student's Dependent Children – Schedule A* of the Application for Financial Assistance</i> form</li> </ul> <b>AND</b> <ul style="list-style-type: none"> <li><i>Family Status Declaration</i> form*</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>Court judgement confirming that you have custody</li> </ul>
Y	M	D															
I: <input type="checkbox"/> I have ___ fewer dependent children. (If applicable, fill out Section 3C or 3E.)	<table border="1"><tr><td>Y</td><td>M</td><td>D</td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table>	Y	M	D													<ul style="list-style-type: none"> <li><i>Family Status Declaration</i> form* (Include the child's last name, first name and, if known, Permanent code)</li> </ul>
Y	M	D															

## Section 4 – Other changes

### AUTONOMY BASED ON EDUCATION

Situation	Date achieved	Required documents						
<input type="checkbox"/> I hold an undergraduate Québec university diploma (Bachelor's Degree).	<table border="1"> <tr> <td>Y</td> <td>M</td> <td>D</td> </tr> <tr> <td>     </td> <td>     </td> <td>     </td> </tr> </table>	Y	M	D				<ul style="list-style-type: none"> <li>Diploma (bachelor's degree)</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>Registrar's attestation confirming the date on which you completed your study program and the diploma that will be issued at a later date</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>Official transcript including the words "Diploma earned" or "Program completed"</li> </ul>
Y	M	D						
<input type="checkbox"/> I hold an undergraduate university degree or equivalent from outside Québec.	<table border="1"> <tr> <td>Y</td> <td>M</td> <td>D</td> </tr> <tr> <td>     </td> <td>     </td> <td>     </td> </tr> </table>	Y	M	D				<ul style="list-style-type: none"> <li>If you earned your degree in Canada: A copy of an official document confirming the university degree (for example: diploma, registrar's confirmation, official transcript)</li> <li>If you earned your degree outside Canada: A copy of the Évaluation comparative des études effectuées hors du Québec (comparative evaluation for studies done outside Québec) issued by the Ministère de l'Immigration, de la Francisation et de l'Intégration</li> </ul>
Y	M	D						
<input type="checkbox"/> I hold a Diploma of Advanced Studies I in Music or certificate of three years of university training issued by a Québec music or theatre school.	<table border="1"> <tr> <td>Y</td> <td>M</td> <td>D</td> </tr> <tr> <td>     </td> <td>     </td> <td>     </td> </tr> </table>	Y	M	D				<ul style="list-style-type: none"> <li>Official document confirming that you earned a Diploma of Advanced Studies I in Music or completed three years of training (for example: diploma, registrar's confirmation, official transcript).</li> </ul>
Y	M	D						
<input type="checkbox"/> I have pursued studies at a Québec university for at least three years and earned 90 credits in a single program.	<table border="1"> <tr> <td>Y</td> <td>M</td> <td>D</td> </tr> <tr> <td>     </td> <td>     </td> <td>     </td> </tr> </table>	Y	M	D				<ul style="list-style-type: none"> <li>Official undergraduate university transcript</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>Registrar's attestation of studies</li> </ul>
Y	M	D						

Important! If you earned the equivalent of 90 credits in a single program that requires 90 credits, you should instead check "I hold an undergraduate Québec university diploma (Bachelor's Degree)."

<input type="checkbox"/> I have pursued full-time university studies outside Québec for at least four years in a single program or, if I hold a Diploma of College Studies, have pursued full-time university studies outside Québec for at least three years in a single program	<table border="1"> <tr> <td>Y</td> <td>M</td> <td>D</td> </tr> <tr> <td>     </td> <td>     </td> <td>     </td> </tr> </table>	Y	M	D				<ul style="list-style-type: none"> <li>Undergraduate university transcript</li> </ul> <p><b>AND</b></p> <ul style="list-style-type: none"> <li>Attestation from the registrar of your educational institution or official document attesting to four years of full-time undergraduate studies in a single program</li> </ul> <p><b>OR</b> (If you hold a Diploma of College Studies)</p> <ul style="list-style-type: none"> <li>Undergraduate university transcript</li> </ul> <p><b>AND</b></p> <ul style="list-style-type: none"> <li>Attestation from the registrar of your educational institution or official document attesting to three years of full-time undergraduate studies in a single program</li> </ul> <p><b>AND</b></p> <ul style="list-style-type: none"> <li>A copy of your Diploma of College Studies (DCS)</li> </ul>
Y	M	D						

### CHANGE OF RESIDENCE

Situation	Date of change	Required documents						
<input type="checkbox"/> I am living with my parents.	<table border="1"> <tr> <td>Y</td> <td>M</td> <td>D</td> </tr> <tr> <td>     </td> <td>     </td> <td>     </td> </tr> </table>	Y	M	D				
Y	M	D						
<input type="checkbox"/> I am no longer living with my parents.	<table border="1"> <tr> <td>Y</td> <td>M</td> <td>D</td> </tr> <tr> <td>     </td> <td>     </td> <td>     </td> </tr> </table>	Y	M	D				<ul style="list-style-type: none"> <li>Attestation Respecting Inexistent or Inadequate Public Transit form* if you no longer live with your parents due to inexistent or inadequate public transit between your parents' home and your school.</li> </ul>
Y	M	D						

### CHANGE IN PHYSICAL CUSTODY

Indicate who has custody of you	Date of change	If you have a parental contribution						
<input type="checkbox"/> Both parents	<table border="1"> <tr> <td>Y</td> <td>M</td> <td>D</td> </tr> <tr> <td>     </td> <td>     </td> <td>     </td> </tr> </table>	Y	M	D				<ul style="list-style-type: none"> <li>Declaration of Father or Sponsor form* if not already on file</li> </ul>
Y	M	D						
<input type="checkbox"/> My parent	<table border="1"> <tr> <td>Y</td> <td>M</td> <td>D</td> </tr> <tr> <td>     </td> <td>     </td> <td>     </td> </tr> </table>	Y	M	D				<ul style="list-style-type: none"> <li>Declaration of Parent or Sponsor form*</li> </ul>
Y	M	D						
First and last names								
<input type="checkbox"/> My sponsor	<table border="1"> <tr> <td>Y</td> <td>M</td> <td>D</td> </tr> <tr> <td>     </td> <td>     </td> <td>     </td> </tr> </table>	Y	M	D				<ul style="list-style-type: none"> <li>Declaration of Parent or Sponsor form*. (Both your parents must reside outside Canada at the beginning of the award year).</li> </ul>
Y	M	D						

**DEATH****Decedent****Date of death****Required documents**
 Parent     Sponsor     Spouse

Y	M	D

 \_\_\_\_\_  
 First and last names
**OTHER CHANGES**
 Please provide details and if applicable, attach all required attestations. If you require more space, please use a separate sheet of paper and attach it to this form.
   
 \_\_\_\_\_
   
 \_\_\_\_\_
**Section 5 – Cost of medication or chiropractic treatment**

These are costs related to the purchase of physician-prescribed medications or chiropractic treatment unless already paid by the Régie de l'assurance maladie du Québec or an insurance company. In the latter cases, only the portion of costs not covered will be considered. Only medications on the list published by the Institut national d'excellence en santé et en services sociaux can be covered.

Monthly costs exceeding \$16 are taken into account when declared, if they apply to you, your children or your spouse's children.

**MEDICATION OR CHIROPRACTIC TREATMENT****Costs incurred****Amount****Required documents** You

\$ \_\_\_\_\_,00

- Invoices (photocopies)

**AND** Dependent child

\$ \_\_\_\_\_,00

- Details on the drug insurance plan (if not mentioned on invoices)

**AND**

- Copy of prescription (chiropractic treatment)

 \_\_\_\_\_  
 Last name

 \_\_\_\_\_  
 First name
 Dependent child

\$ \_\_\_\_\_,00

 \_\_\_\_\_  
 Last name

 \_\_\_\_\_  
 First name
**Section 6 – Change in income**
 My income for the current award year (January 1 to December 31, 2026) has changed.
**Income****(Round off amount to nearest dollar)****Gross employment income**

\$ \_\_\_\_\_,00

**Net self-employed income**

\$ \_\_\_\_\_,00

Specify: \_\_\_\_\_

**Other income**

\$ \_\_\_\_\_,00

Specify: \_\_\_\_\_

**Section 7 – Allowance for Training Support Materials Application**

If you qualify under the Loans and Bursaries Program, you may be entitled to an additional loan in the amount of \$500 for each period of studies in which assistance is granted you during the award year.

Once requested, this supplemental allowance cannot be cancelled and will be paid for each period of studies for which assistance is granted you during award year 2026-2027.

 I am applying for the Allowance for Training Support Materials.

