

APPLICATION FOR SCOTIALINE PERSONAL LINE OF CREDIT FOR STUDENTS

**You can complete this application and fax it to us at 1-800-403-7448;
or fold, seal and mail it to us; or simply drop it off at any Scotiabank branch.**

Please fully complete all of the questions on this application. If there are unanswered questions there may be a delay in processing your application.

I/we, the named account holders read the Terms and Conditions of applying for a *ScotiaLine* personal line of credit for students attached to this application and agree to abide by them. Sign here to apply. Please use dark ink when completing.

Parent/Guardian Borrower (Primary) Signature _____ Date _____

† By signing this application, you acknowledge the primary borrower will receive all notices on this account, and that you have been advised of your ability to receive separate notice and have declined such additional information. We may rely on this agreement through extensions and renewals, as applicable, and until such time as you give us notice in writing that you wish to change your disclosure preference. You may change this disclosure preference at any time in the future by contacting the Scotiabank branch where you do business. Alternatively, if you wish to receive the additional information, please indicate by checking the box [below].

I wish to receive separate notice on this account (i.e., monthly or annual statements) Yes

Student Borrower (Secondary) Signature _____ Date _____

By signing this application, you acknowledge the primary borrower will receive all notices on this account, and that you have been advised of your ability to receive separate notice and have declined such additional information. We may rely on this agreement through extensions and renewals, as applicable, and until such time as you give us notice in writing that you wish to change your disclosure preference. You may change this disclosure preference at any time in the future by contacting the Scotiabank branch where you do business. Alternatively, if you wish to receive the additional information, please indicate by checking the box [below].

I wish to receive separate notice on this account (i.e., monthly or annual statements) Yes

Supporting Borrower Signature _____ Date _____

Which Scotiabank branch would you prefer to deal with? _____ Transit # _____ You prefer to correspond in English French

Do you currently deal with Scotiabank? Yes No If Yes, what is your ScotiaCard Number? _____

Please indicate the amount you require over the duration of your education:

ScotiaLine® personal line of credit for students \$ _____ (eg. \$40,000 for a 4-year Bachelor's Degree program)

No-Fee Scotia Moneyback™ VISA® card with up to 1% Moneyback reward (check appropriate credit limit) \$3,000 \$2,000 \$1,000

Do you wish to receive separate cost of borrowing disclosure documents?† (i.e., monthly or annual statements) Yes No

How did you hear about our *ScotiaLine* personal line of credit for students?

Parent Friend Studentawards.com Guidance Counsellor Financial Aid Administrator Other

STUDENT BORROWER (S) – SECONDARY

Last Name, First Name & Initial			<input type="radio"/> Mr <input type="radio"/> Miss <input type="radio"/> Mrs <input type="radio"/> Ms <input type="radio"/> Dr		Date of Birth (YY/MM/DD)		Social Insurance # (optional)	
Street #	Street Name	Apt #	Postal Code	City	Prov.	Years at residence	Home phone # ()	
Current Employer			Employer's address				Business Phone # ()	
Current Occupation			<input type="radio"/> Full-time <input type="radio"/> Self-employed <input type="radio"/> Part-time <input type="radio"/> Seasonal		Gross Monthly Income \$		Mother's Maiden Name	
Monthly housing costs (rent/mortgage, condo fees, heat, property taxes) \$		Other monthly obligations (eg. spousal, child support)			Have you declared bankruptcy in the last 7 years? <input type="radio"/> Yes <input type="radio"/> No		Are you either a Canadian Citizen or Permanent Resident? <input type="radio"/> Yes <input type="radio"/> No	

TELL US ABOUT YOUR STUDIES

Name of post-secondary institution		Program name (eg. BA, BAH, MBA, MA, MSC, etc.)			How long is your program? (years, months)	
Expected graduation date (year, month)	<input type="radio"/> Full-time <input type="radio"/> Part-time		Are you enrolled in a graduate program?		Is this school located in Canada? <input type="radio"/> Yes <input type="radio"/> No	
If you are currently in your 2nd or later year of study, have you received any government student loans (federal or provincial) in the previous years? <input type="radio"/> Yes <input type="radio"/> No			If yes, what is the total amount of government loan(s) that you have received (excluding any non repayable government bursaries)? \$			
Have you been approved for a government student loan (federal or provincial) in this academic year <input type="radio"/> Yes <input type="radio"/> No			If yes, what is the total amount of government student loan(s) approved for this academic year (excluding any non-repayable government bursaries)? \$			

PARENT / GUARDIAN BORROWER(S) – PRIMARY

Last Name, First Name & Initial			<input type="radio"/> Mr <input type="radio"/> Miss <input type="radio"/> Mrs <input type="radio"/> Ms <input type="radio"/> Dr		Date of Birth (YY/MM/DD)		Social Insurance # (optional)	
Street #	Street Name	Apt #	Postal Code	City	Prov.	Years at residence	Home phone # ()	
Current Employer			Employer's address				Business Phone # ()	
Current Occupation			<input type="radio"/> Full-time <input type="radio"/> Self-employed <input type="radio"/> Part-time <input type="radio"/> Seasonal		Gross Monthly Income \$		Mother's Maiden Name	
Spouse/supporting Borrower Last Name, First Name & Initial			<input type="radio"/> Mr <input type="radio"/> Miss <input type="radio"/> Mrs <input type="radio"/> Ms <input type="radio"/> Dr		Date of Birth (YY/MM/DD)		Social Insurance # (optional)	
If no: Street #	Street Name	Apt #	Postal Code	City	Prov.	Years at residence	Home phone # ()	
Current Employer			Employer's address				Business Phone # ()	
Current Occupation			<input type="radio"/> Full-time <input type="radio"/> Self-employed <input type="radio"/> Part-time <input type="radio"/> Seasonal		Gross Monthly Income \$		Mother's Maiden Name	
Monthly housing costs (rent/mortgage, condo fees, heat, property taxes) \$		Other monthly obligations (eg. spousal, child support) \$			Have you declared bankruptcy in the last 7 years? <input type="radio"/> Yes <input type="radio"/> No			

Will you be using this *ScotiaLine* personal line of credit for students on behalf of anyone other than the named account holder(s)? Yes No
(You should answer "no" to this question if the account will only be used by the Student Borrower, Parent/ Guardian Borrower, or Supporting Borrower.)