ScotiaLine® personal line of credit for students



You and	the school Re	gistrar mu	st complete	this proof of e	nrolment	form for your v	isit to the Bra	inch.	
PROOF	OF ENROLM	ENT							
ScotiaLine personal line of credit account number: Branch Transit # Student ID Address of School Which year of your program are you in?									
Person	al Information								
Title First Name			Last Name			Date of Birth	Social	Social Insurance Number	
Street	No.	Street Na	ame	Unit Type		Unit #			
City		Province		Postal Code		٦			
	Information	Iniversity							
Name of College or University Program / Faculty									
You will be attending school How many years is your program?			m?	O Full-Time	O Part-1				
	to the Registra m confirms to u						ducational Ins	stitution in any way	
	verify that this spest of your kno			rolled at your E	ducation	al Institution ar	nd that the inf	ormation given ab	
Study Start Date			Stu	dy End Date					
Date Signature of Registrar's /				ır's / Fees Offic	e Officia	I Tit	le		
				of Enrollment caus to the Study		dated more thate.	an 1 month		