

## CSC Student Emergency Food Bank Application Form

For statistical purposes, please select one of the following:

I am a Domestic Student

I am an International Student

The Canadore Students' Council (CSC) Operates an Emergency Food Bank for currently attending Full-Time students who are in urgent need of food. We can provide several days of non-perishable food items to those students who qualify.

This service is not meant to be the sole source of food support, nor is it meant to supplement OSAP, GIC installments or personal budgets.

Current Canadore students who require access to this service must reside in the North Bay or Parry Sound areas, and must fill out the application form completely and accurately, including the budget section, then submit both documents as per the instructions in the CSC Student Emergency Food Bank Letter of Understanding and Acknowledgment. If both documents are not completed and submitted according to instructions, it may delay access to the Student Emergency Food Bank.

Once your application package has been received, it will be reviewed and you will receive an email indicating the status of the application. Should the application be approved, you will receive an email indicating a pickup time and date for your items.

You must attend in person and present a valid student ID pick up the items.

Please note that the frequency and amount of food distributed may be subject to change based on available inventory and volume of students requiring this assistance.

By completing and submitting this application, I verify that I understand the terms, conditions and limitations of the Student Emergency Food Bank. I also agree that if I falsify any of the information on this application, I will not be able to access the Student Emergency Food Bank.

I have read and agree with the information above.

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### Information Section

Last Name  First Name

Student Number  Email Address

Campus Currently Attending (CD, CC, AV, WPS, Online)

Current Program  Current Semester of Study (1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, etc.)

I live in a Canadore Residence building  I live in off-campus housing

I certify that I am registered as a full-time student (at least a 60% course load)

Yes  No  If No, are there accommodations in place? Yes  No

I have visited another Food Bank within the last month. Yes  No

If yes, please enter the date & location.

### Budget Section

This section **must** be fully completed for the application to be considered.

**Note:** If there are extenuating or particularly troubling circumstances, please reach out to Student Success Services [studentsuccessnow@canadorecollege.ca](mailto:studentsuccessnow@canadorecollege.ca) or (705) 474.7600 ext. 5205 and/or the International Office as applicable.

### Income and resources for the current semester

Current Bank Balance (you may be asked for proof of this) \$

Family Contribution to Education \$

Guaranteed Investment Certificate or Education Loan Amount \$

If applicable, spouse's gross income during your academic semester \$

Employment income during the semester \$

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**Income and resources for the current semester (continued)**

Government Income (EI, OSAP, Band Sponsorship, ODSP, Second Career, Child Tax Benefits)	\$
Any bursaries or scholarship amounts received	\$
Income from any other sources (please specify)	\$
<b>TOTAL INCOME &amp; RESOURCES FOR THE SEMESTER</b>	<b>\$</b>

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**Living expenses for the current semester**

Tuition, Ancillary Fees or Program associated costs	\$
Rent, Mortgage or Residence fees for the semester	\$
Utilities (heating, hydro, etc.)	\$
Food & Personal items	\$
Telephone, Internet Services	\$
Child Care Expenses (unsubsidized portion)	\$
Transportation Expenses	\$
Medical, Dental or Vision related Expenses (may require copy of bill)	\$
Clothing or Laundry Expenses for the semester	\$
Entertainment Expenses	\$
Any other expenses (please specify)	\$
<b>TOTAL EXPENSES</b>	<b>\$</b>

**Subtract TOTAL EXPENSES from TOTAL INCOME to get your NET Income \$**

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Please indicate the location at which you would prefer to pick up your items, if approved

Aviation  College Drive  Commerce Court  Parry Sound

It is requested that you bring your own reusable shopping bags

Please indicate any dietary restrictions (food allergies, vegan, vegetarian, etc.) in the space provided below. While we try our best to accommodate these, we cannot guarantee the items in stock will all be suitable.

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#### DECLARATION

**I certify that I have read all of the required documentation thoroughly, and that all of the information entered in the application is true and correct to the best of my knowledge.**

**Signature**

**Date**

**\*\* Please note that your application cannot be processed without both the Letter of Understanding and Acknowledgment and the fully completed Application form.**