

APPLICATION DEADLINES FOR THE 2025-26 AID YEAR

SUMMER 2025

May 1, 2025

FALL 2025

August 1, 2025

WINTER 2026

December 1, 2025

U.S. STUDENT PRIVACY PROTECTION

As a Title IV post-secondary institution, Concordia is subject to the requirements of the **Gramm-Leach-Bliley Act (GLBA, 2002)**; implementing the appropriate safeguards regarding students' personal information is required by law.

In addition, under Quebec law, **student information is considered private**. Legally, we are unable to provide information to anyone but the student and authorized internal individuals. [View the policy on personal information privacy here.](#)

To protect your privacy and to avoid the breach of any personally identifiable information (PII), the Financial Aid and Awards Office (FAAO) at Concordia University can only accept documents securely uploaded to your Concordia Student Centre when submitting documents to our office.

PERSONALLY IDENTIFIABLE INFORMATION (PII) are items that can be used to identify you and can include, but are not limited to, your social security number, date of birth and even your address. Emails with attachments that include **PERSONALLY IDENTIFIABLE INFORMATION (PII)** must be deleted and destroyed per Concordia University policy.

Concordia abides by the [Act respecting Access to documents held by public bodies and the Protection of personal information](#). Information about a student's academic progress, attendance, and access to their records cannot be discussed or shared without the student's written permission. For more information, please email fundingyoureducation@concordia.ca

**PLEASE READ THE FOLLOWING PAGES BEFORE COMPLETING YOUR
CONCORDIA UNIVERSITY VA APPLICATION**

Finalizing your application could take a minimum of 4 weeks, so make sure you complete all steps and submit all required documents and forms by the recommended deadlines. The FAAO will continue to process incoming applications after the deadline; however, we cannot ensure that you will receive your funding ahead of the University payment deadline.

Required Steps:

- ☐ Accept your offer of admission to Concordia University.
- ☐ Verify if your program is eligible by consulting the VA WEAMS Institution search:
<https://inquiry.vba.va.gov/weamspub/buildSearchInstitutionCriteria.do>
If your program is not listed, please contact the FAAO as soon as possible as the VA program approval is lengthy.
- ☐ New students: Apply online for [benefits with the VA](#). If you don't have access to apply online, you can call **1-888-442-4551** to request a copy be mailed to you.
- ☐ Once VA has established your eligibility for benefits, they will provide you with a **Certificate of Eligibility**.
- ☐ Book your appointment for [Academic Advising](#) with your Faculty. You must be admitted, registered in a program, and enrolled in classes to receive funding. Registration opens in March for most programs.
- ☐ Obtain a completed **Academic Advising Report** form (page 7 of this document) from your Academic Advisor.
- ☐ Provide permission to Concordia University to release academic and financial school records to the VA by completing the **U.S. VA Consent to Release Confidential Student Records** (page 8 of this document).
- ☐ **Chapter 33 students ONLY:** You must verify your enrollment status each month for enrollment periods which began on or after August 1, 2021, to continue to receive your Monthly Housing Allowance (MHA) and/or kicker payments. You may do this by text message, telephone or email.
- ☐ Let the FAAO know if you need proof of funding letter for your Study Visa and Certificate of Acceptance to Quebec (CAQ). Your application must be fully processed by our office before we can issue one to you.
- ☐ Submit your immigration documentation.
Contact the [International Students Office](#) for more information.

Your completed application and required documents need to be uploaded securely to your Concordia Student Centre. ***Faxed and emailed documents will not be accepted.***

For more information and instructions on how to upload your documents, please visit [this page](#).

The Veterans Administration (VA) offers educational support for Veterans and other eligible persons attending Concordia University. This program can provide funding for your tuition, fees, housing, and books and supplies. Your required documents, enrollment declarations, satisfactory progress and attendance standards are regulated by the VA. The VA will only provide benefits for programs approved by the VA.

IMPORTANT INFORMATION

Isakson and Roe: Public Law 116-315 (Section 1019) Concordia University is responsible for returning funding students have not earned. If this is your situation, your Concordia student account will be debited the amount requested by the VA. You may end up owing a tuition debt to Concordia (VA will charge the school a pro-rated tuition and fee debt which the school may, in turn, pass on to the student) if there is a change in your enrollment during the academic year.

Public Law (P.L) 116-315 Section 1010 requires schools to submit an initial enrollment certification for each chapter 33 student, and a subsequent enrollment certification (verification) after the school's drop-add period. The end of the drop- add period is the last day when a student is able to withdraw from the course or program of education without consequence. The second certification (verification) should be received no later than 30 days after the school's drop-add period or 60 days from the first day of the enrollment period, whichever occurs first.

Veterans and other eligible persons must contact VA directly with any questions about their eligibility or payments, or to apply for benefits. If you have questions about VA education benefits, please call 888-442-4551, Monday through Friday, 8:00 a.m. to 7:00 p.m. ET.

I acknowledge that I have read and understand the information presented on pages 1-3 of this document.

| | |
|---------------------------------|---------------------------------|
| <i>Student Signature</i> | <i>Date (mm/dd/yyyy)</i> |
|---------------------------------|---------------------------------|

ELECTRONIC SIGNATURES ARE ACCEPTED

| |
|----------------------|
| CONCORDIA STUDENT ID |
|----------------------|

| | |
|--|--|
| PERSONALLY IDENTIFIABLE INFORMATION (PII) | |
|--|--|

| | |
|-----------------|----------------------------|
| LEGAL LAST NAME | LEGAL FIRST NAME(S) |
| MIDDLE NAME | DATE OF BIRTH (MM/DD/YYYY) |

Please use your legal first and last names on all funding documentation.

| |
|--|
| ELIGIBILITY STATUS: SELECT ALL THAT APPLY |
|--|

| | |
|---|---|
| <input type="checkbox"/> I AM AN AMERICAN CITIZEN | <input type="checkbox"/> I AM A VETERAN OF THE U.S. ARMED FORCES |
| <input type="checkbox"/> I AM AN ELIGIBLE NON-AMERICAN CITIZEN | <input type="checkbox"/> I AM ON ACTIVE DUTY WITH THE U.S. ARMED FORCES |
| <input type="checkbox"/> I AM DUAL AMERICAN/CANADIAN CITIZEN | <input type="checkbox"/> I AM APPLYING FOR VA BENEFITS FOR THE FIRST TIME |
| <input type="checkbox"/> I AM A CANADIAN CITIZEN WITH CANADIAN FUNDING FROM THIS PROVINCE: | <input type="checkbox"/> I AM AN ELIGIBLE DEPENDENT OF A VETERAN OF THE U.S. |

| |
|--------------------------------|
| OTHER REQUESTED FUNDING |
|--------------------------------|

| | |
|--|---|
| <input type="checkbox"/> I WANT TO RECEIVE U.S. DIRECT LOANS | <input type="checkbox"/> I WANT TO RECEIVE DIRECT PLUS LOANS |
| <input type="checkbox"/> I WANT TO RECEIVE U.S. ALTERNATIVE LOANS | <input type="checkbox"/> OTHER: |

CONCORDIA STUDENT ID NO:

UNDERGRADUATE ACADEMIC INFORMATION

I AM PURSUING A ☐ BACHELOR'S DEGREE ☐ OTHER: _____ IN THE FACULTY OF
☐ ARTS & SCIENCE ☐ JOHN MOLSON SCHOOL OF BUSINESS ☐ GINA CODY SCHOOL OF ENGINEERING & COMPUTER SCIENCE
☐ FINE ARTS ☐ OTHER _____

MY PROGRAM IS:

EXPECTED GRADUATION DATE (mm/yyyy):

CHECK THE SEMESTER(S) YOU REQUIRE FUNDING AND INDICATE THE NUMBER OF CREDITS YOU ARE TAKING:

☐ SPRING/SUMMER 2025: ____ ☐ FALL 2025: ____ ☐ WINTER 2026: ____

UNDERGRADUATE FINANCIAL INFORMATION

ARE YOU GETTING OTHER FINANCIAL ASSISTANCE (OFA) FOR THE 2025-26 ACADEMIC YEAR? ☐ YES ☐ NO

| SPECIFY THE TYPE AND THE CURRENCY | | | AMOUNT | |
|--|------------------------------|---|-----------------|------------|
| CANADIAN STUDENT LOANS (i.e., Alberta, OSAP) | <input type="checkbox"/> USD | <input type="checkbox"/> CAD | FALL/WINTER: \$ | SUMMER: \$ |
| INTERNAL SCHOLARSHIPS/BURSARIES | <input type="checkbox"/> USD | <input checked="" type="checkbox"/> CAD | FALL/WINTER: \$ | SUMMER: \$ |
| EXTERNAL SCHOLARSHIPS/BURSARIES | <input type="checkbox"/> USD | <input type="checkbox"/> CAD | FALL/WINTER: \$ | SUMMER: \$ |
| TUITION WAIVER | <input type="checkbox"/> USD | <input type="checkbox"/> CAD | FALL/WINTER: \$ | SUMMER: \$ |
| OTHER GRANTS/FUNDING (ex. VSAC, FAME, etc.) | <input type="checkbox"/> USD | <input type="checkbox"/> CAD | FALL/WINTER: \$ | SUMMER: \$ |

GRADUATE ACADEMIC INFORMATION

I AM PURSUING A ☐ MASTER'S DEGREE ☐ PhD ☐ OTHER: _____ IN THE FACULTY OF
☐ ARTS & SCIENCE ☐ JOHN MOLSON SCHOOL OF BUSINESS ☐ GINA CODY SCHOOL OF ENGINEERING & COMPUTER SCIENCE
☐ FINE ARTS ☐ OTHER _____

MY PROGRAM IS:

☐ THESIS-BASED
☐ COURSE-BASED

EXPECTED GRADUATION DATE (mm/yyyy):

CHECK THE SEMESTER(S) YOU REQUIRE FUNDING AND INDICATE THE NUMBER OF CREDITS YOU ARE TAKING:

☐ SPRING/SUMMER 2025: ____ ☐ FALL 2025: ____ ☐ WINTER 2026: ____

GRADUATE FINANCIAL INFORMATION

ARE YOU GETTING OTHER FINANCIAL ASSISTANCE (OFA) FOR THE 2025-26 ACADEMIC YEAR? ☐ YES ☐ NO

| SPECIFY THE TYPE AND THE CURRENCY | | | AMOUNT | |
|--|------------------------------|------------------------------|-----------------|------------|
| CANADIAN STUDENT LOANS (i.e., Alberta, OSAP) | <input type="checkbox"/> USD | <input type="checkbox"/> CAD | FALL/WINTER: \$ | SUMMER: \$ |
| INTERNAL SCHOLARSHIPS/BURSARIES | <input type="checkbox"/> USD | <input type="checkbox"/> CAD | FALL/WINTER: \$ | SUMMER: \$ |
| EXTERNAL SCHOLARSHIPS/BURSARIES | <input type="checkbox"/> USD | <input type="checkbox"/> CAD | FALL/WINTER: \$ | SUMMER: \$ |
| TUITION WAIVER | <input type="checkbox"/> USD | <input type="checkbox"/> CAD | FALL/WINTER: \$ | SUMMER: \$ |
| OTHER GRANTS/FUNDING (ex. VSAC, FAME, etc.) | <input type="checkbox"/> USD | <input type="checkbox"/> CAD | FALL/WINTER: \$ | SUMMER: \$ |

I, _____ **(please print)** certify that all the above information, and the information provided on this document and to the Department of Veteran Affairs, is true and accurate to the best of my knowledge. I agree to notify Concordia University and the Department of Veteran Affairs of any changes which may impact my eligibility, or which may impact the amount I am able to receive.

| | |
|--------------------------|---------------------|
| <i>Student Signature</i> | <i>(mm/dd/yyyy)</i> |
|--------------------------|---------------------|

I, _____ **(please print)** understand that I must inform my School Certifying Officer (SCO), at Concordia University of any changes in my circumstances, including but not limited to changes in enrollment, student status, awards, academic probation, living arrangements, contact information, etcetera. I understand that failure to advise can result in the delay and/or discontinuation of VA funding. I acknowledge that it is my responsibility to provide accurate and updated information to Concordia University and the Department of Veteran Affairs throughout the funding period and I exonerate the aforementioned parties from any harm or damages incurred by inaccurate, missing, or expired information.

| | |
|--------------------------|---------------------|
| <i>Student Signature</i> | <i>(mm/dd/yyyy)</i> |
|--------------------------|---------------------|

I, _____ **(please print)** understand that Concordia University is a Foreign School. Accordingly, in compliance with 38 CFR §21.4260, the Department of Veteran Affairs does not award benefits for distance learning or independent study courses at Concordia University.

| | |
|--------------------------|---------------------|
| <i>Student Signature</i> | <i>(mm/dd/yyyy)</i> |
|--------------------------|---------------------|

I, _____ **(please print)** understand that by signing my name below I irrevocably authorize the Financial Aid and Awards Office at Concordia University to withdraw money(ies) from my Student Account if the Department of Veteran Affairs request that Concordia University return VA Funds, which occurs if I withdraw from my studies at Concordia University. Furthermore, if the return of VA Funds results in an outstanding balance on my student account, I will pay the outstanding balance immediately. I agree that failure to pay any outstanding balance may result in the loss of university privileges and services, as outlined by Concordia University regarding unpaid fees.

| | |
|--------------------------|---------------------|
| <i>Student Signature</i> | <i>(mm/dd/yyyy)</i> |
|--------------------------|---------------------|

To be filled out by your Academic Advisor in your Faculty at your educational institution. Students applying for U.S. Department of Veteran Affairs Benefits are required by the U.S. VA to provide their School Certifying Official with a signed copy of their approved courses for the academic term in question. Please have your Academic Advisor review and approve your registered courses.

STUDENT INFORMATION

| | |
|------------------|-----------------------|
| DATE: | CONCORDIA STUDENT ID: |
| LEGAL LAST NAME: | LEGAL FIRST NAME: |
| ACADEMIC YEAR: | ACADEMIC TERM: |

ACADEMIC INFORMATION

| | |
|---|---|
| FACULTY <input type="checkbox"/> ARTS & SCIENCE <input type="checkbox"/> JMSB <input type="checkbox"/> ENG & COMP SCI <input type="checkbox"/> FINE ARTS <input type="checkbox"/> INDEPENDENT STUDENT | |
| LEVEL OF STUDIES <input type="checkbox"/> UNDERGRADUATE <input type="checkbox"/> GRADUATE | PROGRAM: |
| MAJOR: | SPECIALIZATION: |
| <input type="checkbox"/> COOP | ANTICIPATED PROGRAM COMPLETION DATE: (MM/YYYY) <input type="checkbox"/> COMPLETED STUDIES |
| GRADUATE MA/PHD: STATUS FOR CURRENT ACADEMIC TERM | <input type="checkbox"/> THESIS <input type="checkbox"/> COURSE-BASED |
| STUDENT STATUS <input type="checkbox"/> FULL-TIME <input type="checkbox"/> CIP <input type="checkbox"/> PART-TIME <input type="checkbox"/> LEAVE OF ABSENCE <input type="checkbox"/> LEAVE OF ABSENCE WITH ACCESS | |

COURSE INFORMATION (NO WAIT-LISTED COURSES)

| COURSE INFORMATION (NO WAIT-LISTED COURSES) | | FOR OFFICE USE ONLY | | | |
|---|---------|----------------------------|---|----------------------|--------|
| COURSE NAME AND NUMBER | CREDITS | REQUIRED FOR PROGRAM (Y/N) | % | REPT | ONLINE |
| | | | | | |
| | | | | | |
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| | | | | | |
| TOTAL COURSE LOAD PERCENTAGE: | | PROGRAM CODE | | YEAR OF STUDY | |

DECLARATION AND SIGNATURE OF ADVISOR

Signature of Academic Advisor
or delegate

Full name

Date

Notice of collection of Personal Information. The personal information on this form is collected in accordance with the Act respecting Access to documents held by public bodies and the Protection of personal information (R.S.Q., chapter A-2.1 Quebec) and with Concordia University's Policy Concerning the Protection of Personal Information (SG-9). For more information, please visit the Office of the Secretariat online at: <https://www.concordia.ca/about/administration-governance/secretariat.html>

To be filled out by the student.

| STUDENT INFORMATION | |
|---------------------|-------------------------------|
| DATE: | CONCORDIA STUDENT ID: |
| LEGAL LAST NAME: | LEGAL FIRST NAME: |
| ACADEMIC YEAR: | SOCIAL SECURITY NUMBER (SSN): |

| DECLARATION AND SIGNATURE | | |
|---|------------|--------------------|
| <p>I, _____, grant Concordia University permission to discuss my Full legal name</p> <p>confidential academic records and financial school records with Veterans Affairs (VA), and to release my Social Security Number (SSN). Such information will be used as required by the VA Benefits for the management of my VA File.</p> <p>I understand that I can either amend or revoke this consent in the future by writing to Concordia University's Financial Aid & Awards Office: fundingyoureducation@concordia.ca</p> | | |
| STUDENT'S SIGNATURE: | | DATE (MM/DD/YYYY): |
| NAME OF SCHOOL OFFICIAL: | SIGNATURE: | DATE (MM/DD/YYYY): |

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