



## **MATAWA POST-SECONDARY PROGRAM**

200 N. Lillie St, Thunder Bay, ON P7C 5Y2 / Phone: (807)768-3300 EXT 3319 Fax: (807)768-3301 Email: postsecondary@matawaeducation.ca

## AFFIRMATION OF RESIDENCE, MEAL PLAN, AND TUITION COSTS

Affirmation of understanding
I,, by signing this consent, confirm to the Matawa Post-Secondary program that I have knowledge of the following:
<ul> <li>All tuition-based costs (i.e., Full amount of tuition needed to pay for programming) for the applied term.</li> <li>All residence-based costs (i.e., Full amount of cost of residency if I am applying for residence on campus) and any cost/terms of conditions for meal plans that are required during the applied term.</li> <li>Confirmation that I am submitting the correct cost of tuition, residence, and meal plan for the applied term.</li> </ul>
I,, by signing this consent, confirm that the Matawa Post-Secondary program is not responsible for the additional cost of tuition, outside of approved amounts, that are provided and/or indicated when my application is processed for the applied term.
I,, by signing this consent, confirm that the Matawa Post-Secondary program is not responsible for the additional cost of residence, outside of approved amounts, that are provided and/or indicated when my application is processed for the applied term.
I,, by signing this consent, confirm that the Matawa Post-Secondary program is not responsible for the additional cost of meal plans, outside of approved amounts, that are provided and/or indicated when my application is processed for the applied term.
DATE: STUDENT SIGNATURE
DATE: MPS STAFF SIGNATURE
Issued by: Education Dept. Issue Date: Nov. 29, 2012 Revision # 10 Date: April 1st, 2025. EDUC PS FORM 304 Approved by:









