



**INFORMATION REQUIRED BY CANADA REVENUE AGENCY (CRA)
FOR T4A FILING SCHOLARSHIPS AND AWARDS**

Please return the completed form as an attachment via email to: infocfns@cfns-fcne.ca
(please save form using the following format: T4A_INFO_FIRST NAME_LAST NAME)

Scholarship/Award Information

Award Name: _____ Award Amount: _____

Please allow two (2) weeks for cheques to be issued. CFNS will issue A T4A for Income Tax Purposes.

Special Instructions:

Personal Information

Full Name: _____
Last First Middle Initials

Address: _____
Street Address and Mailing Address Apartment/Unit #

City Province Postal Code

Phone: _____

Email: _____

SIN: _____ Student ID: _____

School: _____

Campus Address: _____
Street Address

City Province Postal Code

TO BE COMPLETED BY CFNS	
Check payable to student or school (Please circle response)	
Cheque number: _____	Date: _____
Transaction number: _____	Approved by: _____