



McGill ID: _____

Last name: _____

First name: _____

Declaration: (please spell month for all date fields)

I declare that during the period from _____ to _____, I was not enrolled in any full-time courses in Quebec. My educational institution has informed me of the fact that subsequent validations will be performed in the databases and that any fraudulent representation will be detected.

If my statement proves to be fraudulent, I will have to pay the unpaid lump sums and will be exposed to the legal consequences of a false sworn statement.

Signature (*signed in the presence of a Commissioner for Oaths*)

Date

Commissioner for Oaths (stamp and signature required)