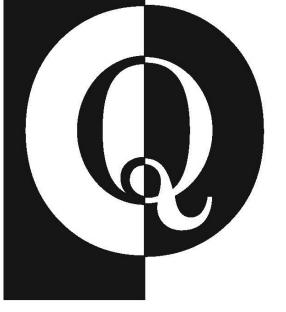






# **Ontario – Quebec Health Study Program**



### 1. General Information

The Ontario-Quebec Health Study Program is designed to increase the number of French-speaking professionals available to provide health services in French in Ontario. At the same time, the program increases the opportunities available to French-speaking Ontario residents to pursue postsecondary studies in French.

Each year, in accordance with the Ontario-Quebec Agreement for the Admission of Ontario Residents to Selected Programs Offered in French at Quebec Universities, the two participating universities in Quebec – Université Laval and Université de Montréal – reserve five places in three limited-enrolment programs for participants in the Ontario-Quebec Health Study Program.

This program allows French-speaking Ontarians the opportunity to be admitted to limited-enrolment programs in health studies in Quebec, which are not available in French in Ontario. Candidates who are accepted must agree to return to Ontario upon completion of their studies to practice their profession for a minimum of twenty-four months in a region of the province that is designated for services in French under the *French Language Services Act*. (A sample copy of the return-of-service agreement may be obtained from the administrator of the Ontario-Quebec Health Study Program, at the address provided on the next page.)

The Government of Ontario makes annual payments to the Government of Quebec for each position filled by a resident of Ontario under the Ontario-Quebec Health Study Program. However, the program does not provide scholarships or other forms of financial assistance to successful applicants. Students are responsible for their tuition fees and other expenses. Participants in the program pay the same tuition fees as Quebec students.

#### 2. Programs of Study

The Ontario-Quebec Agreement allows for the admission of up to five students per year in each of the following programs:

Program	Participating Universities				
Dentistry	Université Laval, Université de Montréal				
Optometry	Université de Montréal				
Pharmacy	Université Laval, Université de Montréal				

## 3. Eligibility

To be eligible for the Ontario-Quebec Health Study Program, an applicant must:

- be a permanent resident of Ontario (that is, must have resided in Ontario for at least the past twelve consecutive months, not including residence in the province for the purpose of attending an Ontario postsecondary educational institution);
- · be a Canadian citizen or permanent resident of Canada;
- · be able to undertake university studies in French;
- intend to register as a full-time student in one of the selected programs offered in French at a participating Quebec university;
- · meet the admission requirements of a participating Quebec university;
- agree to enter into a return-of-service agreement with the Province of Ontario upon admission to a Quebec university. In signing the return-of-service agreement, a participant in the program agrees to work for twenty-four months in an area of Ontario designated for French-language services. The period of service is to begin no later than six months after completion of the program of studies.

#### 4. Information on Financial Assistance

Information on student loans or other forms of assistance, including the Ontario Student Assistance Program (OSAP), is available from university financial aid offices. Applicants may also contact the Ministry of Colleges and Universities at the following address:

Student Financial Assistance Branch Ministry of Colleges and Universities PO Box 4500 Thunder Bay ON P7B 6G9 Telephone: 1-877-672-7411 807-343-7260 (direct line for students outside of North America)

## 5. Application Procedure

To be considered for admission to a Quebec university under the Ontario-Quebec Health Study Program, applicants must follow two separate application procedures:

#### Application to one or more universities in Quebec:

Applicants must apply directly to the Quebec universities in order to be considered for the positions set aside for participants in the Ontario-Quebec Health Study Program. The universities are solely responsible for setting admission requirements and for selecting the applicants who are offered positions. Applicants should consult the appropriate university calendars and websites for program entry requirements, application procedures, and deadlines.

#### • Application to the Ontario-Quebec Health Study Program:

Applicants must also complete the Notice of Application form attached to this pamphlet and submit it to the Ministry of Colleges and Universities no later than March 1.

The Notice of Application includes a declaration that the applicant is a permanent resident of Ontario, as defined above, and that he or she is prepared to comply with the program's return-of-service requirement. Proof of Canadian citizenship (birth certificate or certificate of citizenship) or proof of status as a permanent resident of Canada must be included with the Notice of Application. Photocopies of relevant documents are acceptable.

Early in March, the ministry will provide the Quebec universities with a list of applicants considered eligible to participate in the Ontario-Quebec Health Study Program. Since the universities use this list in their selection process, applicants should ensure that the Notice of Application contains complete and accurate information about the programs and universities to which they have applied or intend to apply under the Ontario-Quebec Health Study Program.

Send the completed Notice of Application form to the ministry at the address below no later than March 1:

Ontario-Quebec Health Study Program French-Language Priorities Branch Ministry of Colleges and Universities 315 Front Street West, 14th floor Toronto ON M7A 0B8 Telephone: 647-244-3833 Email: <u>studyinquebec@ontario.ca</u>

This publication is also available on the ministry's website at: <u>Ontario.ca/studyinquebec</u>.



Ontario-Quebec Agreement for the Admission of Ontario Residents to Selected Programs Offered in French at Quebec Universities

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Part 1 – Pers	onal Information								
Applicant's Last Name			ŕ	Applicant's First Name					
Applicantle Mid				Data of Dirth (					
Applicant's Middle Name(s)				Date of Birth (yyyy/mm/dd)					
Present Addre	SS								
Unit Number	Street Number	Street Name	Street Name						
City/Town		Province			Postal Code		Telephone Number		
Email				Address Val	id Until				
Permanent Ad	dress								
Unit Number	Street Number	Street Name							
City/Town		Province	Province		Postal Code		Telephone Number		
Citizenship Sta	atus								
Canadian Ci	itizen 🗌 Permane	nt Resident	Other (s	specify) 🕨					
Part 2 – Onta	rio Residency								
Are you current	ly a resident of Ontario	?	Period	eriod of residency in Ontario					
Yes No			Date From (yyyy/mm/		dd) Date To (yyyy/mm/dd)		To (yyyy/mm/dd)		
Part 3 – Educ	ation		<u> </u>			1			
Postsecondary	y Education								
<b>1.</b> Institution									
City/Town				Province					
Program				Degree Obtained					
Dates Attended	l								
Date From (yyyy/mm/dd) Date To (yyy			(yyyy/m	y/mm/dd)					
<b>2.</b> Institution									
City/Town				Province					
Program				Degree Obtained					

Data Attandad						
Dates Attended						
Date From (yyyy/mm/dd)	Date To (yyyy/mm/dd)					
Secondary Education						
Institution						
City/Town	Province	Province				
Program	Diploma Obtained					
5						
Dates Attended						
Date From (yyyy/mm/dd)	Date To (yyyy/mm/dd)					
Part 4 – Application for admission under	the Ontario-Quebec program					
University of Laval	University of Montreal					
Program(s) of Study	Program(s) of Study					
Preferred Language of Communication	lish French					

## Part 5 – Signature

I have enclosed proof of Canadian citizenship or permanent resident status and declare that I have been a resident of Ontario for at least the past twelve consecutive months, not including residence in the province for the purpose of attending an Ontario postsecondary educational institution. I also declare that all information in this Notice of Application is accurate and complete. I make this application with the understanding that, if admitted by a Quebec university under the terms of this agreement, I shall be required to return to Ontario and work for a minimum of twenty-four months in an area of the province designated for Frenchlanguage services by the Government of Ontario.

I understand that all information provided by me is subject to verification and audit by the Ministry of Colleges and Universities

In accordance with section 39(2) of the *Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, Chapter F.31, this is to advise you that the personal information collected on this form will be used for the ongoing administration of the Ontario-Quebec Health Study Program, including the enforcement of the terms and conditions of the agreement that applicants admitted to Quebec universities under the program must sign. For this purpose, the personal information may be disclosed to the participating Quebec universities, the Quebec government, the ministries of the Ontario government, and their agents. The information is collected under the authority of the *Ministry of Colleges and Universities Act*, R.S.O. 1990, Chapter M.19. Questions about this collection should be directed to the Ontario-Quebec Health Study Program, at the address given in the publication.

Signature

Date (yyyy/mm/dd)