

**FINAL CLAIM**

PROJECT FILE#: 2010\_\_\_\_\_

[Please print or type]

Name of hiring organization

Division/Department

Amount requested: \$\_\_\_\_\_

**Final Claim** will be mailed to the address that was provided for the **Approval Letter**.

Signature \_\_\_\_\_ Date: \_\_\_\_\_  
(Contact person on Contract)

- Attach:** 1. **Payroll Record** form  
2. **Record of Employment** (if student is no longer employed with your organization)

Return these forms by May 23, 2011

**How to contact us —**

**By Mail:**

Economic and Rural Development  
Student Employment Programs  
PO Box 2311  
Halifax, NS B3J 3C8

**By Courier:**

Economic and Rural Development  
Student Employment Program  
1660 Hollis Street, Suite 600  
Halifax, NS B3J 1V7

**By Phone, Fax, or E-mail:**

Toll-free: 1-800-424-5418  
Local: (902) 424-6000  
Fax: (902) 424-0508  
E-mail: [sepinfo@gov.ns.ca](mailto:sepinfo@gov.ns.ca)

**Website:** [www.gov.ns.ca/econ/sep](http://www.gov.ns.ca/econ/sep)