

# International Student Financial Aid Application

The form should be filled out by the student, with the parent's assistance as needed. Every use of the words 'you' or 'your' on this form refers to the student. On this application, "parents" refers to the custodial parent(s)—those with whom the student lives. If the biological or adoptive parents are divorced or separated, the custodial parent(s) are those with whom the student has lived with the longest during the 12 months prior to completing the application. If the custodial parent has re-married, "parents" includes the student's biological/adoptive parent and stepparent.

Please complete all fields that apply to you. **Convert all currency amounts to US dollars.**

## A. STUDENT INFORMATION

1. Student's Name: \_\_\_\_\_  Male  Female •  Married  Unmarried  
LAST/FAMILY NAME                      GIVEN NAME                      MIDDLE NAME

Date of Birth: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

### 2. Permanent Home Country Mailing Address

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

### 3. Current Address (if different from above)

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

### 4. Other Information

Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

Academic Major: \_\_\_\_\_ Degree Program:  Bachelor's  Master's • Semester of Enrollment:  Fall 20 \_\_\_\_  Spring 20 \_\_\_\_

Which type of student are you?

First time college/university student  Transfer student  Returning student  Graduate student

If you are applying to other colleges/universities, please list your top three other options:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

## B. FAMILY INFORMATION

1. If you are an undergraduate student or if you are a graduate student who receives financial support from your parents, please complete the items below:

Parents' marital status:  Married  Never married  Separated/Divorced  Widowed  Remarried

Father: \_\_\_\_\_ Age: \_\_\_\_\_ Occupation: \_\_\_\_\_  
LAST/FAMILY NAME                      GIVEN NAME                      MIDDLE NAME

Employer: \_\_\_\_\_ Number of years at employer: \_\_\_\_\_

Mother: \_\_\_\_\_ Age: \_\_\_\_\_ Occupation: \_\_\_\_\_  
LAST/FAMILY NAME                      GIVEN NAME                      MIDDLE NAME

Employer: \_\_\_\_\_ Number of years at employer: \_\_\_\_\_

How many people depend on your parents for daily living expenses (including yourself)? \_\_\_\_\_

2. If you are an undergraduate student or if you are a graduate student who receives financial support from your parents, provide information on the chart for ALL family members who are dependents of your parents. Do not include yourself. If you are a graduate student who does not depend on your parents for funds, provide information for any of your dependents.\* *Chart is on the next page.*

\*This chart is for ALL dependents, not just those in college.

			Current Year: 20__ - 20__					Next Year: 20__ - 20__		
Name of Dependent	Age	Relationship to you	School/College/University	Year in School	Total Cost	Scholarships (total dollar amount)	Parent Contribution	School/College/University	Total Cost	Parent Contribution

**C. FINANCIAL INFORMATION - Convert all amounts to US dollars**

Please provide tax forms, employer salary statement, bank statements, or other documents to verify the information provided below.

1. Today's exchange rate: \_\_\_\_\_ Are there any government restrictions on releasing funds from your country? If yes, what are they?

**Income and Assets**

2. During the last calendar year, how much of your income came from the following sources:

Father's employment: \_\_\_\_\_ Mother's employment: \_\_\_\_\_ Your employment: \_\_\_\_\_

Your spouse's employment: \_\_\_\_\_ Family Business: \_\_\_\_\_ Family real estate holdings: \_\_\_\_\_

Retirement funds/pension: \_\_\_\_\_ Other household members: \_\_\_\_\_ Interest/dividends: \_\_\_\_\_

Housing, food, or other allowances: \_\_\_\_\_ Other: \_\_\_\_\_

3. Do you anticipate any change in your family's income next year?  Yes  No Please describe: \_\_\_\_\_

4. Does your family own a home?  Yes  No If yes, please answer the questions below.

What year was it purchased? \_\_\_\_\_ What was the original price? \_\_\_\_\_

How much do you still owe on the purchase price? \_\_\_\_\_ What is its present market value? \_\_\_\_\_

5. Does your family own a business?  Yes  No If yes, please answer the questions below.

What kind of business? \_\_\_\_\_ When was it started? \_\_\_\_\_

What is your family's share of the business assets and debt? \_\_\_\_\_

6. Does your family own any vehicles?  Yes  No If yes, please list the make, model, and year of each vehicle.

\_\_\_\_\_  
 \_\_\_\_\_

7. Please indicate the value of any of the following assets if your family holds them.

Value of land/buildings other than home/business: \_\_\_\_\_ Savings: \_\_\_\_\_

Debt on land/buildings other than home/business: \_\_\_\_\_ Investments: \_\_\_\_\_

Your personal assets: \_\_\_\_\_ Other assets: \_\_\_\_\_

**Income and Assets (cont'd)**

8. Does anyone owe your family money?  Yes  No If yes, how much will be repaid to you this year? \_\_\_\_\_
9. Does your family have money, property, or assets in another country?  Yes  No If yes, please describe, including what type of asset, the value of the asset in US dollars, and who owns it. \_\_\_\_\_

**Expenses and Budget**

10. How much did your family spend on the following items in the last calendar year?
- Rent/mortgage: \_\_\_\_\_ Utilities: \_\_\_\_\_ Food: \_\_\_\_\_
- Clothing: \_\_\_\_\_ Household Necessities: \_\_\_\_\_ Medical Expenses: \_\_\_\_\_
- Educational Expenses: \_\_\_\_\_ Loans: \_\_\_\_\_ Taxes: \_\_\_\_\_
- Savings/retirement allocations: \_\_\_\_\_ Vehicle payments/maintenance: \_\_\_\_\_
- Insurance: \_\_\_\_\_ Entertainment: \_\_\_\_\_ Servants/household staff: \_\_\_\_\_
- Other: \_\_\_\_\_
11. Does your family employ other people?  Yes  No If yes, how many and in what capacity are they employed? \_\_\_\_\_
12. Does your family owe any money to other people or institutions?  Yes  No If yes, please describe the reason for the debt and list the total amount of the debt and the total amount of the debt paid off in the previous calendar year. \_\_\_\_\_
13. How will you pay for your travel to the US? \_\_\_\_\_
14. Will you have emergency funds available to you when you arrive in the US?  Yes  No If yes, what is the source and how much is available? \_\_\_\_\_
15. List the expected amount of support toward your educational costs from each of these sources:

	Year 1	Year 2	Year 3	Year 4
Your personal income & assets				
Family's Income				
Family's Assets				
Private Sponsor (relatives, friends)				
Government				
Other: (please explain)				

16. Are you applying for financial aid from other agencies/foundations/governments?  Yes  No If yes, please describe the source, the expected amount of the award, and the date you will be notified about the award. \_\_\_\_\_
17. Is there any other information that we should consider as we evaluate your eligibility for need-based aid? \_\_\_\_\_

Please sign below to verify that the information provided in this form is accurate, complete, and truthful. Failure to provide accurate, complete, and truthful information may jeopardize your admission to the University.