

INTERNATIONAL STUDENT FINANCIAL AID APPLICATION FOR 2024-25 ACADEMIC YEAR

Please complete and return this form to Susquehanna University | suadmiss@susqu.edu

— INSTRUCTIONS FOR FORM COMPLETION —

The International Student Financial Aid Application is designed to gather information from international students who are applying for financial aid at Susquehanna University. When completing the application, it is important to:

- ▶ Answer all questions that apply to you and your family.
- ▶ Convert all currency figures to U.S. dollars (\$) before entering them on the form.

Some of the questions on the International Student Financial Aid Application are self-explanatory; the instructions that follow are only provided for questions that may need further explanation.

Section A: Student's Information

This section pertains to the student who is applying for aid.

Section B: Parents' Information

On this application, "parents" means the custodial parent(s) — the parent or parents (or legal guardian) with whom the student lives. If the student's biological or adoptive parents are divorced or separated, the custodial parent(s) are the parent or parents with whom the student has lived the most during the 12 months prior to filing the application. If the custodial parent has remarried, "parents" includes the student's biological/adoptive parent and stepparent.

SECTION A: STUDENT'S INFORMATION

MR. MS. MRS. MISS

FAMILY NAME (SURNAME)

LEGAL FIRST NAME

LEGAL MIDDLE NAME

DATE OF BIRTH (MM/DD/YYYY)

PLACE OF BIRTH (COUNTRY)

EMAIL ADDRESS

PERMANENT ADDRESS

MAILING ADDRESS (if different than above)

COUNTRY(IES) OF CITIZENSHIP

EXPECTED VISA TYPE: F-1 F-2 J-1 J-2 H G-1 G-2 G-3 G-4

OTHER: _____

When do you expect to begin your studies at Susquehanna University?

MM/YYYY

Will you be: Attending a college/university for the first time? Transferring from another college/university? A returning student?

List the colleges/universities to which you are applying: _____

MARITAL STATUS: NOT MARRIED MARRIED/IN A DOMESTIC PARTNERSHIP

If married, how many people are financially dependent on you? _____

SECTION B: PARENTS' INFORMATION

PARENTS' MARITAL STATUS: MARRIED/IN A DOMESTIC PARTNERSHIP SEPARATED/DIVORCED WIDOWED NEVER MARRIED

PARENT 1

FAMILY NAME (SURNAME)	LEGAL FIRST NAME	RELATIONSHIP	AGE
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ADDRESS

OCCUPATION/TITLE	EMPLOYER	YRS W/ EMPLOYER
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PARENT 2

FAMILY NAME (SURNAME)	LEGAL FIRST NAME	RELATIONSHIP	AGE
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ADDRESS

OCCUPATION/TITLE	EMPLOYER	YRS W/ EMPLOYER
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SECTION C: EXPECTED SUPPORT FOR EDUCATIONAL EXPENSES

Enter the expected amount of annual support (in U.S. dollars) toward your educational costs from the sources listed below:

	2024-25	2025-26	2026-27	2027-28
STUDENT'S ASSETS	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00
FAMILY'S INCOME	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00
FAMILY'S ASSETS	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00
RELATIVES AND FRIENDS	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00
YOUR GOVERNMENT	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00
AGENCIES AND FOUNDATIONS	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00
PRIVATE SPONSOR <i>(explain in Section D)</i>	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00

List agencies/foundations/government to which you are applying for financial aid. *(If more than two, attach a list.)*

AGENCY/FOUNDATION/GOVERNMENT	APPLICATION DATE	AWARD NOTIFICATION DATE	EXPECTED AMOUNT IN U.S.\$
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AGENCY/FOUNDATION/GOVERNMENT	APPLICATION DATE	AWARD NOTIFICATION DATE	EXPECTED AMOUNT IN U.S.\$
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SECTION D — EXPLANATION/SPECIAL CIRCUMSTANCES

Please explain any unusual expenses, other debts or special circumstances that the institution should consider when it is deciding how much financial aid, if any, you will receive: _____

CERTIFICATION & AUTHORIZATION

We declare that the information on this form is true, correct and complete. Susquehanna University may verify the information reported by obtaining documentation as needed.

WARNING: Providing false information may jeopardize a student's visa status and furthermore may result in a college revoking its initial decision to enroll the student.

STUDENT'S SIGNATURE

SPOUSE'S SIGNATURE *(if applicable)*

PARENT 1'S SIGNATURE

PARENT 2'S SIGNATURE *(if applicable)*

DATE COMPLETED (MM/DD/YEAR)