2014–15 INTERNATIONAL STUDENT APPLICATION FOR FINANCIAL AID

DEADLINE: April 1, 2014



INSTRUCTIONS: This form should be completed and returned with all supporting documentation to **Calvin College, Office of Admissions and Financial Aid, 3201 Burton St. SE, Grand Rapids, MI 49546, U.S.A.,** by April 1, 2014. If you fax or email this form, it is not necessary to mail it. Fax: +1-616-526-6777, Email: intladm@calvin.edu

This form is an application for financial aid. While Calvin College offers financial aid to international students, it is a limited resource. Any nondisclosure or omission of a substantive material fact (the hiding of important information) will result in the rescinding of financial aid awarded to the student and/or termination of the student's SEVIS record and I-20.

INFORMATION ABO Please type or print.	OUT THE STUDENT					
☐ Male ☐ Female						
Name	Last/Family	First/Given			Middle	
Place of Birth		Birthdate (M/	/D/YR)			
Home Address	Number and Street	City	State	Postal Code/Zip	Country	
Mailing Address (if different from home ad	Number and Street dress)	City	State	Postal Code/Zip	Country	
Home Telephone (Countr	y Code) City/Area Code Number	Cu	rrent Telephone	(Country Code) City/	Area Code Number	
Fax Number (Country Co	de) City/Area Code Number Attn	: E-1	Vlail			
Citizenship						
·	S., what type of visa do you					
in currently in the O.S	5., what type of visa do you	. HOIU!				
Your Marital Status?	☐ Not Married ☐ Married	If married, how ma	ny people are fir	nancially dependent u	upon you?	
INFORMATION ABO	OUT YOUR APPLICATION					
Type of applicant	☐ First-Year Student	□ Transfer	Student	☐ Re-Admitted	l Student	
Anticipated date of e	nrollment:					
Have you ever applie	ed for financial assistance a	at Calvin College	e? □ No	☐ Yes		
If yes, list most recer	nt academic year of applica	ation:				
Nondiscrimination Policy Calvin College does not of	discriminate with regard to age,	race, color, nationa	al origin, gendel	r or disability in any o	of its educational pr	ograms or activities.

INFORMATION ABOUT YOUR PARENTS								
What is your parent(s)' current marital statu	ıs: 📮 N	Married	■ Separat	ed/Divorced	☐ Other			
		Mother livir	_					
		ather living						
	u E	3oth Paren	ts decease	ed				
☐ Parent ☐ Stepparent ☐ Guardian			☐ Parent ☐ Stepparent ☐ Guardian					
Name Last/Family First/G			Name	1/5		F: 1/0:		
,			Name Last/Family First/Given					
Home Address			Home Add	ress				
E-mail			E-mail					
Occupation/Title			Occupation	n/Title				
Employer			Employer _					
Number of years with Employer			Number of	years with Emp	loyer			
Work Phone Number Country Code City Code			. Work Phone NumberCountry Code City Code Number					
If parents are separated or divorced, with w		t are vou liv	ving?		-			
If both parents are deceased, give your gua	rdian's nam	ne and add	Iress					
How many persons, including yourself, dep	end on the	income of	your parei	nts or guardiar	for daily	living exper	ises?	
HOUSEHOLD INFORMATION								
Complete the following information about the people you and your parent(s) will support between July 1, 2014, and June 30, 2015. Include: your parent(s) your parent(s)' dependent children other people only if they lived in your home and received more than half of their support from you or your parent(s) and will continue to receive this support between July 1, 2014, and June 30, 2015.								
Name Age Relations	ship to you	Will attend school or college in 2014-15		Name of school or college this person will attend in		Year in school	Amount of support provided by your	
		Yes	No	2014-15	2014-15	family US \$		
	Number of dependent children in college/university: Year 1 Year 2 Year 3 Year 4 Note: No increase in financial aid is made after the first year for additional siblings/parents in college/university.							

FINANCIAL INFORMATION

What is the official currency of your country?				
Does your government currently impose restrictions on the exchange and release of funds for study in the United States?				
□ No □ Yes				
If yes, describe the restrictions:				
Do you have a source of emergency funds once you arrive in the U.S.? ☐ No ☐ Yes				
If yes, name of source: Amount available in U.S. dollars:				
How will you pay for your transportation to and from home?				
Do you have relatives or family friends currently living in the U.S.? No Yes				

Please provide student's and parent(s)' 2013 income and a projection of 2014 income below.

In U.S. Dollars

STUDENT INCOME INFORMATION	Actual 2013	Projected 2014
1. Student's income from work	\$	\$
2. Spouse's income from work (if applicable)	\$	\$
3. Interest/dividend income from savings accounts and investments, CDs (stocks/bonds)	\$	\$
4. Other income - list source:	\$	\$
Total	\$	\$
PARENT INCOME INFORMATION		
1. Father/Stepfather's/Guardian's income from work	\$	\$
2. Mother/Stepmother's/Guardian's income from work	\$	\$
3. Interest/dividend income from savings accounts and investments, CDs (stocks/bonds)	\$	\$
4. Income from pension, annuities, retirement plans	\$	\$
5. Income from family business/farm/rental property	\$	\$
6. Income from other members of the household	\$	\$
7. Other income - list source:	\$	\$
Total	\$	\$
FAMILY ASSET INFORMATION		
Student's cash, savings/checking and investments (CDs/stocks/bonds)	\$	N/A
2. Student's investments and real estate/business/farm	\$	N/A
3. Parents' cash, savings/checking and investments (CDs/stocks/bonds)	\$	N/A
4. Parents' retirement plans (Include on this line only)	\$	N/A
5. Parents' home	\$	N/A
6. Parents' real estate/business/farm	\$	N/A
Total	\$	N/A

Please indicate your family's annual expenses for 2013 (in U.S. dollars).				
1. Rent or mortgage	6. Medical care			
2. Utilities (electric, gas, water, etc.)	7. Insurance			
3. Food	8. Taxes			
4. Clothing	9. Other-List			
5. Household necessities				

SOURCES OF FUNDS

The total **estimated** expense for the 2014–15 academic year is U.S. **\$43,100**. The total expense is comprised of the following:

Tuition and Fees \$29,500

Room & Board \$9,600

Books & Supplies \$1,000

Health Insurance \$1,700

Personal \$1,300

The student is expected to cover any increase in the above expenses each year of enrollment.

Indicate below, in U.S. dollars, the financial sources and amounts available to cover these expenses for each year of education and provide the appropriate supporting documentation verifying your ability to cover the costs for the first two years. Additional information may be required by the college. NOTE: If you do not provide the requested supporting documentation, you will not receive an admission decision by Calvin College. If the expected financial sources and amounts are not available while enrolled, the student risks dismissal from the college due to financial reasons.

Tell us the amount of money available from each source	First Year	Second Year	Third Year	Fourth Year	Two-Year Documentation Required
Family income from work	\$	\$	\$	\$	Provide signed statement from employer(s); documentation of current income sufficient
Family cash, checking, savings and investments					Provide official bank statements
Student cash, checking, savings and investments					Provide official bank statements
Student summer income					
Sponsors (private sponsors*, relatives, your government, agencies and foundations, outside scholarships *See below for required sponsor					Provide signed statement of support and third-party documentation of funds
information					
Other (explain)					Provide signed documentation
TOTAL					

DOCUMENTATION CHECKLIST

Your file will not be considered for admission until the applicable documents on this checklist are provided. We require all supporting documents to be original or certified documents. Documents can be sent via email or fax:

- Parent's Income Statement(s). This can be a statement issued by an employer(s) or person in charge of company finances, or a government issued tax document with the income amount listed. This statement must be provided regardless of whether any amounts are pledged toward your educational costs.
- Parent's Bank Statements(s). This bank statement must demonstrate that you can cover at least two years of your pledged amount noted above as family cash, checking, savings, and investments.
- Student's Bank Statement(s). This bank statement must demonstrate that you can cover at least two years of your pledged amount noted above as student cash, checking, savings, and investments.
- Sponsor's Letter of Intent (if applicable). This letter is written by your sponsor indicating the amount they pledge towards your educational costs.
- Sponsor's Bank Statement(s). This bank statement must demonstrate that your sponsor can cover at least two years of their pledged amount towards your educational costs.

SPONSOR INFORMATION				
Sponsor's Name	Sponsor's Name			
Address	Address			
Phone Number	Phone Number			
E-mail	E-mail			
Employer	Employer			
Date	Date			
CERTIFICATION AND AUTHORIZATION				
We declare that the information on this form is true, correct, and complete. Calvin College has our permission to verify the information reported by obtaining documentation as needed.				
WARNING: Providing false information may jeopardize a student's visa status and may result in Calvin College revoking its initial decision to admit or enroll the student.				
Student Signature	Date			
Parent/Stepparent/Guardian Signature	Date			
Parent/Stepparent/Guardian Signature	Date			