
Application for Financial Aid for International Students

This application must be completed and returned to the Office of Enrollment Management by each applicant for financial assistance. All income information must be converted to United States currency.

A. Personal Financial Information

Name of applicant _____
Last (Family Name) First Middle

Mother's name _____

Mother's age _____ Mother's occupation _____

Father's name _____

Father's age _____ Father's occupation _____

	Last Year (actual)	Current Year (actual)	Next Year (actual)
List family income: U.S.\$	_____	_____	_____
Mother's income: U.S.\$	_____	_____	_____
Father's income: U.S.\$	_____	_____	_____

Other family income (explain in Section B)

Is the family's main source of income a family-owned business? Yes No

How many persons, including the applicant, are dependent on the family income? _____

Please complete the following for each dependent person:

Name of Dependent	Relationship to Applicant	Age	Male or Female
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Which of the dependents listed above are in school?

Name	Name and Location of School	Annual Cost of Attendance- Family Contribution
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Does your family own their home? Yes No

If yes, complete the following: Current sale value of home: U.S.\$_____ Purchase price: U.S.\$_____

List your family's assets below:

Land and buildings (other than home)	U.S.\$ _____
Savings	U.S.\$ _____
Investments (such as stocks and bonds)	U.S.\$ _____
Debts owed the family (explain in section B)	U.S.\$ _____
Other (jewelry, antiques, household furnishings, etc.)	U.S.\$ _____

Do you or your family have assets in a country other than your own? Yes No

If yes, describe the sources of the assets in Section B and complete the following:

Amount in U.S.\$ _____ Country in which assets are held: _____

Does your family receive income from these assets? Yes No
If yes, is the income available to you in the United States? Yes No

Complete the following if your family owns automobiles:

Makes (such as Fiat, Ford, VW) _____ Years of Manufacture _____

State the average amount of money spent each year by your family:

Food	U.S.\$ _____
Clothing	U.S.\$ _____
Housing (rent or mortgage payments)	U.S.\$ _____
Taxes	U.S.\$ _____
Medical care (if amount is greater than \$200, explain in Section B)	U.S.\$ _____

Name the agencies or foundations to which you are or will be applying for financial assistance:

Section B Explanation and Additional Information

Applicant or her family must provide verification of the financial information on this form (for example: tax forms, employer's statement, etc.). Please add any comment regarding the questions above; use another sheet if necessary. Mention any special circumstances that you feel Cottey College should consider in judging the amount of money, if any, the applicant will need.

Certification

We declare that the information reported on this form is true, correct and complete. Cottey College has our permission to verify the information reported by obtaining documentation as specified in Section B.

Applicant's Signature _____ Date _____

Mother's Signature _____ Date _____

Father's Signature _____ Date _____

Please send to: Office of Enrollment Management, 1000 W. Austin, Nevada, MO 64772 USA
