



**INTERNATIONAL STUDENT FINANCIAL AID APPLICATION
WHITWORTH UNIVERSITY, SPOKANE WASHINGTON**

This application is for international undergraduate students who wish to apply for financial aid from Whitworth. *Financial aid awards vary based on student circumstances. There are no full cost scholarships.*

Please complete all questions, convert all currency figures to US dollars (\$)

Return the form to:

**International Admissions Office
Whitworth University
300 West Hawthorne Road
Spokane WA 99251
USA**

STUDENT INFORMATION Term and year you wish to receive aid: _____

1. Name (as it appears on your passport):

Family (Surname)	Given (First)	Middle
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2. Permanent Address: _____

3. Mailing Address: _____

4. Telephone Number: _____ Facsimile (FAX) Number: _____

5. Date of Birth: _____ 6. Marital Status: _____ Single _____ Married
Month Day Year

7. Amount of financial aid you are requesting for the coming academic year (9 months): _____

PARENT INFORMATION

8. Parents' Current Marital Status: Married Single Widowed

Father

Mother

9. Parents' Names: _____

Address: _____

Occupation: _____

Annual Income: _____ (US \$ _____) _____ (US \$ _____)

10. Please list the value of the following family assets as of today (enter "0" for none):

Land and Buildings (other than home): _____ Savings: _____

Investments (such as stocks and bonds): _____ Money Owed to Family: _____

11. List all the people who will depend on the income of your parents for daily living expenses while you attend your first year at Whitworth:

CURRENT EDUCATIONAL INFORMATION								
Full Name of Family Member	Age	Relation-ship	Name of School Currently Attending	Year	Tuition & Fees	Room & Board	Scholar-ship/Aid	Parent Contribution

12. Does your government currently impose restrictions on the exchange and release of funds for study in the United States? Yes No If yes, please describe the restrictions: _____

13. Does your government provide any assistance for education? If so, explain _____

How much assistance/term? (U.S. \$) _____

14. How will you pay for transportation to the United States? _____

15. Enter the expected amount of annual support(in US\$) toward your educational costs from the following:

This information must be completed.

Student's vacation earnings:	_____	Your government:	_____
Student's assets:	_____	Agencies & foundations:	_____
Family's income:	_____	Family's assets:	_____
Relatives and friends:	_____		
Private sponsor*:	_____	*Explain here:	_____
Other*:	_____	*Explain here:	_____

TOTAL ANNUAL SUPPORT: _____

16. Use this space to explain any special circumstances that Whitworth should consider when making your financial aid award.

We declare that the information on this form is true, correct, and complete. Whitworth has our permission to verify the information reported by obtaining documentation when needed.

Student's Signature _____

Date: _____

(If applicable)

Spouse's Signature _____

Date: _____

(Parent's signature required if you are 23 years of age or younger)

Parent's Signature _____

Date: _____

Whitworth University does not discriminate in its educational programs or activities on the basis of race, creed, color, national or ethnic origin, gender, marital status, age, or physical disability.