

## INTERNATIONAL STUDENT FINANCIAL AID APPLICATION FOR 2025-26 ACADEMIC YEAR

Please complete and return this form to Susquehanna University | [suadmiss@susqu.edu](mailto: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

Please enter the amount of financial support you are planning to pay (in U.S. dollars) towards your annual educational costs from the sources listed below:

	2025-26	2026-27	2027-28	2028-29
<b>STUDENT'S ASSETS</b>	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00
<b>FAMILY'S INCOME</b>	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00
<b>FAMILY'S ASSETS</b>	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00
<b>RELATIVES AND FRIENDS</b>	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00
<b>YOUR GOVERNMENT</b>	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00
<b>AGENCIES AND FOUNDATIONS</b>	U.S. \$ _____ .00	\$ _____ .00	\$ _____ .00	\$ _____ .00
<b>PRIVATE SPONSOR</b> <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)