

Washington and Lee University International Grant Supplement 2018–19

The W&L grant supplement form is required for all applicants who are not United States citizens or permanent residents and are seeking W&L University need-based grant. This form is part of the complete International need-based grant application and must be submitted, along with the CSS Profile and Certification of Finances, if you wish to be evaluated for need-based grant eligibility. *United States citizens and permanent residents do not need to complete this form.* This form may be mailed, or uploaded to the W&L upload site.

Family and Student Data

The W&L International Grant is awarded based on financial need. Therefore, we require accurate and complete information about your family and personal resources. Use the best figures available to you. W&L does expect the student's family to contribute to his/her education to the extent possible.

1. Full name _____ Gender _____ Date of birth _____
Family nameFirstMiddleMonth / Day / Year
2. Country of birth _____ Country of citizenship _____
3. Permanent home address _____
Number and streetCity or townState, province or countryZip or postal code
4. Permanent home telephone _____ Email address _____
Country codeCity codeNumber
5. Father's name _____ Age _____
6. Father's occupation _____ Employer _____
7. Mother's name _____ Age _____
8. Mother's occupation _____ Employer _____
9. Primary source of family income: Salary/wages Family-owned business/farm Other _____
10. List your family's total annual income in U.S. dollars for the year 2016:

Father's Total Earnings (Gross)	US\$ _____
Mother's Total Earnings (Gross)	US\$ _____
Other income (describe these income items below*)	US\$ _____
Total Gross Income	US\$ _____

*Description of other income: _____

11. List your family's total annual payments that reduced your total (gross) income in U.S. dollars for the year 2016:

Income taxes paid	US\$ _____
Property taxes paid	US\$ _____
Rent or Mortgage payment	US\$ _____
Health care expenses	US\$ _____
Educational expenses (other than applicant)	US\$ _____
Total Reductions	US\$ _____

12. Does your family employ other people? Yes No

If yes, how many In the home _____ In the family business _____ Other _____

13. Do you have a source of emergency funds once in the U.S.? Yes No If yes:

Amount US\$ _____ Source _____

14. Are there government restrictions on taking money out of your country for your education abroad?

If Yes provide details _____

15. Enter the expected amount of annual support toward your educational costs from the sources listed below:

	First year	Second year	Third year	Fourth year	Total
Student's summer earnings	US\$ _____	US\$ _____	US\$ _____	US\$ _____	US\$ _____
Student's assets	US\$ _____	US\$ _____	US\$ _____	US\$ _____	US\$ _____
Family's income	US\$ _____	US\$ _____	US\$ _____	US\$ _____	US\$ _____
Family's assets	US\$ _____	US\$ _____	US\$ _____	US\$ _____	US\$ _____
Relatives and friends	US\$ _____	US\$ _____	US\$ _____	US\$ _____	US\$ _____
Student's government	US\$ _____	US\$ _____	US\$ _____	US\$ _____	US\$ _____
Agencies and foundations	US\$ _____	US\$ _____	US\$ _____	US\$ _____	US\$ _____
Other (explain)	US\$ _____	US\$ _____	US\$ _____	US\$ _____	US\$ _____
TOTAL	US\$ _____	US\$ _____	US\$ _____	US\$ _____	US\$ _____

16. Please use another sheet to add any comments or explanations regarding the questions above, include any circumstances that impact your family's ability to contribute. Examples would be unusual family medical expenses, debts or support of dependents other than those listed above.

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"We declare that the information reported on this form is true, correct and complete and that we will send timely notice of any significant change in family income or assets, financial situation, or of the receipt of other scholarships or grants."

WARNING: Providing false information may jeopardize a student's visa status and/or admission and financial aid status.

Signature of father/stepfather _____ Date _____

Signature of mother/stepmother _____ Date _____

Signature of student _____ Date _____