



International Student Financial Aid Application

For Academic Year _____

Date Form Completed _____

Please complete this entire application as thoroughly as you can and submit it with documentation of your resources in a timely manner. If you list savings, outside scholarships, family support or church support, you **must** enclose verification of this support when you return this form. For example, savings documentation must come from your bank on official stationery. Church or scholarship support must come in the form of a letter from the granting church or agency. Please note that we can not calculate your eligibility for need-based PTS grant aid until all documentation requested above has been received. **Please remember to report all funds in U.S. dollars. No institutional funds will be awarded until all of this information is received.**

ENROLLMENT INFORMATION

Degree Program M.Div. M.A. Th.M.
 Ph.D. (Years completed: _____)

Expected Graduation Date _____

STUDENT INFORMATION

Name _____
Last (Family) First (Given) Middle Initial

SSN _____ / _____ / _____
(If already obtained)

Address _____
Street Address Apartment Number

Date of Birth _____

_____ City State/Province Zip/Postal code Country

Phone _____

Country of Citizenship _____

PTS Student Box Number _____
(If already a PTS Student)

Email Address _____

Marital Status Married Separated Divorced Date _____
 Widowed Single

Spouse's Name _____ Spouse's Employer _____

Is spouse a student? Yes No If yes, what is his/her status: Full-time Half-time Less than half-time

If yes, name of school _____

Number of children living with you at PTS _____ Names and birthdates _____

Your Religious Denomination _____

RESOURCES FOR EDUCATIONAL EXPENSES

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

SOURCES OF FUNDS	ASSURED SUPPORT 12 months (upcoming academic year)	PLAN FOR PROJECTED SUPPORT (for future academic years, if applicable)
	June 1 - May 31 20____ -20 ____	Covering future years 20____ - 20 ____
Student's assets _____ Name of bank	US\$	US\$ per year:
Student's earnings*	US\$	US\$ per year:
Spouse's earnings	US\$	US\$ per year:
Family's assets _____ Name of bank _____ Name on account and relationship to student	US\$	US\$ pledged per year:
Relatives and friends _____ Name of bank _____ Name on account and relationship to student _____ Name of bank _____ Name on account and relationship to student	US\$	US\$ pledged per year:
	US\$	US\$ pledged per year:
	US\$	US\$ pledged per year:
Your government _____ Name of agency	US\$	US\$ per year:
Agencies & foundations _____ Name of agency _____ Name of agency	US\$	US\$ pledged per year:
	US\$	US\$ pledged per year:
Church/denominational support _____ Name of church/church body _____ Name of church/church body	US\$	US\$ pledged per year:
	US\$	US\$ pledged per year:
Other (Explain below)	US\$	US\$ per year:
TOTAL RESOURCES:	\$	\$

*If spouse accompanies the student at PTS, he/she will be in F-2 Status. As such, he/she will be unable to be employed on or off campus given the terms of this classification.

Explain any other sources of expected support: _____

Has your government imposed restrictions on the exchange and release of funds for study in the U.S.?

YES NO If yes, describe restrictions: _____

Do you have a source of emergency funds for use in the U.S.? YES NO **Amount in US\$** _____

If yes, name source: _____

How will you pay for your roundtrip transportation to and from the U.S.? _____

EDUCATIONAL EXPENSES

How much do you anticipate spending on the following expenses in the upcoming school year (June 1 - May 31)? Please review the Financial Aid Handbook (available at <http://www2.ptsem.edu/offices/admissions/financialaid/>) for standard student budgets.

TYPE OF EXPENSE	AMOUNT OF EXPENSE Estimate for academic year of this application (June 1 - May 31)	For Office Use Only
Tuition and fees	US\$	
Housing or rent & utilities (If single, report room and board.)	US\$	
Food and household supplies (family) (If single, report non-board meals.)	US\$	
Books	US\$	
Clothing, laundry, and cleaning	US\$	
Medical insurance premiums	US\$	
Medical expenses not paid for by insurance	US\$	
Loan payments (Please specify: _____)	US\$	
Taxes	US\$	
Automobile operation and maintenance	US\$	
Automobile Insurance	US\$	
Recreation, entertainment, etc.	US\$	
Child care for working parent	US\$	
Other expenses (Explain here)	US\$	
TOTAL EXPENSES:	US\$	
TOTAL RESOURCES (from previous page):	US\$	
BALANCE:	US\$	

****If you feel you need to explain any of your expenses in greater detail, please do so on the final page.****

STUDENT CERTIFICATION

By my signature below, I certify that all of the information on this form is true and complete to the best of my knowledge. I understand that I must supply proof of the information that I have given on this form and have attached or will shortly supply this information. I agree to advise the Office of Admissions and Financial Aid of any changes in the information I have provided in this application. I understand that no Princeton Theological Seminary aid will be awarded until I supply verification of the resources I have identified on this application.

Student's Signature

Date

ADDITIONAL INFORMATION for review by the Office of Admission and Financial Aid:

Return Completed Application to:

Questions? Contact us:

Office of Admissions and Financial Aid
 Princeton Theological Seminary
 P.O. Box 821
 Princeton, NJ 08542-0803
 U. S. A.

via E-mail: Fin-Aid@ptsem.edu
 via World Wide Web: www.ptsem.edu
 via phone: (800) 622-6767 ext. 7805
 via fax: (609) 497-7870