

## ESAP FINANCIAL AID APPLICATION FORM (Foreign Nationals)

Please submit a copy of your parent/ guardians' 2016 Tax Forms and earnings statements (equivalent of the US 1040 form and W-2 statement) along with your financial aid form. For example, the Canadian form is the T4, and the Indian form is Form 16. Forms not written in English must be translated by an impartial third party.

Mail your financial aid form and supporting materials to: ATTN: ESAP 220 South  $33^{\rm rd}$  St.

109 Towne Building

Philadelphia, PA 19104-6391

\*To expedite the process email to <a href="mailto:esap@seas.upenn.edu">esap@seas.upenn.edu</a> or fax to 215-573-5577\*

	Section A – Applicant Information	
1. Name:		
Family (surname)	Given (first)	Middle
2. Permanent address:	3. Email address:	
4. Mailing address: (If different from above)	5. Date of birth:	
6. Place of birth (country):		list all):
	Section B – Parents' Information	
☐ Married or domestic partnership	Section B – Parents' Information	
8. What is your parents' current marita  Married or domestic partnership  Never married  The partnership or	Section B – Parents' Information  Il status? (Mark only one box)   □ Separated/ Divorced □ Widow	red 🔲 Remarried
☐ Married or domestic partnership ☐ Never married  D. Father's name: a. Age:	Section B – Parents' Information  Il status? (Mark only one box)  □ Separated/ Divorced □ Widow  10. Mother's name:  a. Age:	red   Remarried
☐ Married or domestic partnership ☐ Never married  D. Father's name: a. Age: b. Address:	Section B – Parents' Information  al status? (Mark only one box)  Separated/ Divorced	red □ Remarried
☐ Married or domestic partnership ☐ Never married  D. Father's name: a. Age: b. Address:	Section B – Parents' Information  Il status? (Mark only one box)  Separated/ Divorced	red   Remarried
☐ Married or domestic partnership ☐ Never married  9. Father's name: a. Age: b. Address:	Section B – Parents' Information  al status? (Mark only one box)  Separated/ Divorced	red

12. List those in your household who will be dependent upon (i.e., supported by) your parent(s) in 2016-2017.

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Include yourself, your parent(s) (or your custodial parent if divorced/ separated), your (step) brothers and (step) sisters, and other relatives.

Name	Age	Check if living with	Name of Present School or College	Year in School/ College	Tuition and Fees	Room and Board	Scholarships or Gift Aid	Parental Support Toward Educational	Name of Institution to be Attended	Тур	e of Instit	ution	Check if Full Time
		family						Expenses		Public School	Private School	College	
1													
2													
3													
4													
5													
6													

		Section C – Financial In	formation		
13. What document	tation will y	ou be providing to verify income and as	set information	requested on this form?	
☐ Tax forms	☐ Statemen	at from employer   Other (specify,	i.e. bank staten	nent)	
14. What is the offi	•	ge rate of your country's currency to the	U.S. dollar toda	ay? (i.e., 3,100 pesos = \$1)	)
15. Does your gove	ernment curr	rently impose restrictions on the exchange	ge and release or	f funds for study in the U.S	.?
☐ Yes ☐ No If yes, please describ	be:			· 	
If yes, name the	e source:	nergency funds once you arrive in the U		□ No	
		transportation to the U.S.? (i.e., parents' household income (before taxes/ expen	•		
. Father's work	•	e. Family real estate holdings		i. Housing, food, & other	\$
. Mother's work	\$	f. Pension/ annuity/ retirement	\$	living allowances j. Other (explain)	\$
Your work		g. Other members of the household			
. Family's business		h. Interest or dividends	\$		
	-	ncrease or decrease in your family's inc	•	☐ Yes ☐ No	



		Sec	ction D – A	sset Information		
20. Does your family	own its h	ome? □ Yes	□ No (If ye	s, complete <b>20a – 20d</b> below)		
<ul><li>a. What year was it purc</li><li>b. What was the origina</li></ul>		 price? U.S. \$		c. How much is still owed on the d. What is the present market value.		
21. Does your family	own a bu	siness?   Yes	□ No (If y	yes, complete <b>21a – 21d</b> below)		
a. Date business comme     b. Type of business				Your parents' share of business value? Your parents' share of business indebte		
22. Please list the val	ue of the	following family	assets (if app	olicable):		
a. Land and buildings (business) indebtedness	other than l	nome or	11 <b>C</b>	d. Assets owned by student	IIα Φ	
Indebtedness on land an	d buildings	S	U.S. \$	•	U.S. \$ others	
b. Savings	_ canamg	-	U.S. \$			
c. Investments (i.e., sto	cks and bo	nds)	U.S. \$	g. Other (jewelry, artwork, an		
23. Do you or your fa (If yes, complete the §		. Include amou				
		U.S. \$ Value		In which country(ies)?	Asset owner	
Money		U.S. \$				
Property		U.S. \$				
Assets		U.S. \$				
•	•			(If yes, complete <b>24a</b> and <b>24b</b> below b. Year of the second second below by the second seco		
			Section E	Z – Expenses		
25. How much did yo	our family	spend on the fo	llowing exper	nses during 2016? (Please record all	expenses)	
Rent or mortgage	U.S. \$ _		Amount allocated to savings/ retirement		U.S. \$	
Utilities	U.S. \$ _		_ Automobile	e maintenance	U.S. \$	
Food	U.S. \$ Insurance (healt		health and property)	U.S. \$		
Clothing	U.S. \$ Entertainment		ent	U.S. \$		
Household necessities	ties U.S. \$ Vacations				U.S. \$	
	U.S. \$ _		Servants		U.S. \$	
Medical expenses	TT 0 0		Other		U.S. \$	
Medical expenses Educational expenses	U.S. \$ _		Dlagga avnl	ain:	U.S. \$	
•			_ riease expi			
Educational expenses	U.S. \$ _		-			
Educational expenses Loan payments	U.S. \$ _		-			
Educational expenses Loan payments Taxes	U.S. \$ _ U.S. \$ _		-	ncial institutions? U.S. \$		

27. Does your family employ other people? 

Yes 

No If yes, how many in the home? \_\_\_\_\_ In the family business? \_\_\_\_\_



## Section F – Expected Support for Educational Expenses

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

Sources	2016 - 2017
Student's vacation earnings	U.S. \$
Student's assets	U.S. \$
Family's income	U.S. \$
Family's assets	U.S. \$
Relatives and friends	U.S. \$
Your government	U.S. \$
Agencies and foundations	U.S. \$
Private sponsor (explain in Section G)	U.S. \$
Other (explain in Section G)	U.S. \$

29. List agencies/ foundations/ government to which you are applying for financial aid. (If more than two, attach a list.)

Agency/ Foundation/ Government	<b>Application Date</b>	Award Notification Date	Expected Amount in U.S. \$

## Section G – Explanation/ Special Circumstances

Use this space to 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. Use additional sheets if necessary.



Section D	- Estimated Resources	
Note: Because funds are limited, we base all aw	ards on financial eligibility.	
1. List the amount you can contribute toward the	he 2017 ESAP program cost of \$7,3	375:
From parent(s)' income/assets	\$	
From spouse's income/assets		
Other		
Total	\$	
Section H -	- Certification and Authoriz	zation
We understand that the information provided on eligibility for ESAP and does not guarantee an o		an estimate of the applicant's financial aid
We hereby certify that the information presented	on this application is correct at thi	is time.
Signature of parent or guardian		Date:
Signature of parent or guardian		Date: