

Student Information

Name: _____
Family Given Middle

Email Address (if available): _____

Permanent Address: _____

Are you currently in the US? Yes No

If yes, please indicate type of visa: _____

Mailing Address for I-20 (can't be a postal box): _____

Phone Number at Mailing Address (required): _____

Employer & Job Title: _____

Date of Birth: _____
Day Month Year

City of Birth: _____

Country of Birth: _____

Country of Citizenship: _____

Gender: Female Male Other

Do you have a US Social Security Number? Yes No

If yes, please enter number here: _____

Country of Legal Permanent Residence: _____

Have you previously been granted an F or J visa? Yes No

If you previously came to the US on an F or J visa, what dates (month & year) were you in the US, and what type of visa did you have for each period of time you were in the US?

Dependent Information

DEPENDENT 1

Name: _____
Family Given Middle

Email Address (if available): _____

Date of Birth: _____
Day Month Year

City of Birth: _____

Country of Birth: _____

Country of Citizenship: _____

Gender: Female Male Other

Relationship to Applicant: _____

Means to support this person: _____

Country of Legal Permanent Residence: _____

Have you previously been granted an F or J visa? Yes No

If you previously came to the US on an F or J visa, what dates (month & year) were you in the US, and what type of visa did you have for each period of time you were in the US?

DEPENDENT 2

Name: _____
Family Given Middle

Email Address (if available): _____

Date of Birth: _____
Day Month Year

City of Birth: _____

Country of Birth: _____

Country of Citizenship: _____

Gender: Female Male Other

Relationship to Applicant: _____

Means to support this person: _____

Country of Legal Permanent Residence: _____

Have you previously been granted an F or J visa? Yes No

If you previously came to the US on an F or J visa, what dates (month & year) were you in the US, and what type of visa did you have for each period of time you were in the US?

Student Sources of Funds (other than SIT Financial Aid)

PERSONAL SAVINGS

Bank Name: _____ Bank Address: _____

Amount of Assured Support (*please indicate type of currency, if not in US dollars*): \$ _____

Please attach:

- * **Recent bank statement** (*within the last three months*)

PARENTS OR FAMILY

Name: _____ Address: _____

Phone: _____ Email: _____

Amount of Assured Support (*please indicate type of currency, if not in US dollars*): \$ _____

Please attach:

- * **Signed letter of support** stating specific amount of funds
- * **Bank statement** demonstrating resources

SPONSOR(S)

Name: _____ Address: _____

Phone: _____ Email: _____

Amount of Assured Support (*please indicate type of currency, if not in US dollars*): \$ _____

Please attach for each sponsor:

- * **Signed letter of support** stating specific amount of funds
- * **Bank statement** demonstrating resources

GOVERNMENT OR OTHER SUPPORT

Name: _____ Address: _____

Phone: _____ Email: _____

Amount of Assured Support (*please indicate type of currency, if not in US dollars*): \$ _____

Please attach for each source of support:

- * **Copy of the award letter** with specific amount of funds from the organization or government agency you listed

TOTAL SUPPORT: \$ _____

Does your government currently impose restrictions on exchange and release of funds for study in the US? Yes No

If yes, describe restrictions: _____

I certify that the information on this form is true, correct, and complete. I understand that any misrepresentation may be cause for refusing or revoking admission.

Signature of Student: _____ Date: _____

Please Return Completed Form & Supporting Documentation to SIT Financial Aid Office

Fax: 802 258 3508 | Email: finaid@sit.edu | Mail: PO Box 676, Brattleboro, Vermont 05302-0676