



2008-2009 UHD Financial Aid Application for International Students

Please print clearly.

1. SS#: _____ - _____ - _____ 2. UHD ID: _____ - _____ - _____

3. Name: _____
Last First MI Previous/Other

4. Address: _____
Street Apt. #

5. City: _____ State: _____ Zip: _____

6. Home Phone: _____ - _____ - _____ Other Phone: _____ - _____ - _____

7. Date of Birth: ____/____/____ Email: _____

8. Are you in the U.S. on a student visa? Yes No

If "No," you are completing the wrong form. Please complete the UHD Financial Aid Application and Free Application for Student Aid.

9. Indicate the number of hours for which you will enroll:
Fall 2008: _____ hours
Spring 2009: _____ hours

There is no international student aid in the summer.

10. What is your educational objective at UHD?

- First Bachelor's Degree Master's Degree
- 2nd Bachelor's Degree* Teacher's Certification only (earned 1st degree)

* Must submit PB Certification Form

11. Date you expect to complete your degree/program (MM/YYYY): _____

12. Have you ever attended a college, university, business or trade school?

- No, I have never attended a college, university, business or trade school.
- Yes, I have attended a college, university, business or trade school. The college(s), university(ies), business or trade school(s) I have previously attended are:

<u>School Name</u>	<u>Date(s) Attended</u>
1. _____	_____ / _____ to _____ / _____
2. _____	_____ / _____ to _____ / _____
3. _____	_____ / _____ to _____ / _____
4. _____	_____ / _____ to _____ / _____
5. _____	_____ / _____ to _____ / _____

Attach a separate sheet for additional schools if necessary.

(OVER)

13. Are you concurrently enrolled at another institution? Yes* No
* If you are enrolled concurrently at another institution you cannot receive financial aid at both schools. If it is later determined that you have received aid at both institutions, you will be responsible for full repayment of the aid received.

14. Do you expect to receive financial assistance for school from a source OTHER THAN the UHD Office of Scholarships and Financial Aid? Example: *Scholarship, employer tuition assistance/reimbursement*

Yes No If YES, please explain: _____

15. At what location(s) will you be attending classes? (check all that apply)

- Downtown Campus The University Center (Woodlands) Cinco Ranch
 Ft. Bend Campus San Jacinto College North

16. ATTACH REQUIRED DOCUMENTATION:

- a) Obtain a copy of the sponsorship affidavit from the UHD International Admissions Office.
- b) Request a letter from your sponsor indicating why he/she cannot provide the necessary support to you. The letter must be mailed directly from the sponsor to our office. The letter should include:
 - i) your name
 - ii) your student id number
 - iii) why your sponsor cannot continue to support you. The sponsor must be specific as to what changes have occurred that prohibit continued financial sponsorship.
 - iv) The letter must be notarized.



The letter must be in English or have an English translation included with the letter.

DO NOT SIGN BELOW until you have carefully read the statements below. You will be held responsible for this information.

- 1. I will consult with and inform the OSFA of any changes which may affect my financial aid eligibility, such as the number of hours for which I intend to enroll, a change in my anticipated graduation date, program of study or residency status.
- 2. I understand that my PIN number will be required to access my financial aid records on the internet and telephone
- 3. I understand that receipt of institutional scholarship funds may reduce or cancel my Non-Resident TPEG grant.
- 4. I understand that the final determination of my eligibility for aid will be based on the number of hours for which I am enrolled on the Official Day of Record published in the class schedule. I may be responsible for repaying a portion or all of any financial aid I receive if I reduce the number of hours for which I am enrolled prior to the Official Day of Record.

CERTIFICATION

My signature below acknowledges that I have read and do understand the information on this form. My signature further affirms that all information submitted to the OSFA for the purpose of determining my eligibility for financial aid is true and correct to the best of my knowledge.

Student Signature

Date