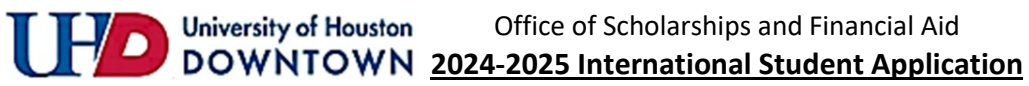


UHD ID: _____ Student's First Name: _____ Last Name: _____



International students seeking financial aid from the University of Houston Downtown must submit a complete application and documentation to be considered for a financial aid award.

STEP 1: Student Information		
Mailing Address		
City	State	Zip
Home Phone	Other Phone	Email Address
Are you in the U.S. on a student visa? <input type="checkbox"/> Yes <input type="checkbox"/> No*		
<i>*If "No," you are ineligible for financial aid as an International student. Please complete either the FAFSA (for U.S. Citizens and eligible non-citizens) or the TASFA (for Texas residents who are not U.S. citizens).</i>		
Indicate the numbers of hours for which you will enroll:	Fall 2024 _____ Spring 2025 _____	
What is your educational objective at UHD?	<input type="checkbox"/> First Bachelor's Degree <input type="checkbox"/> Second Bachelor's Degree* <input type="checkbox"/> Master's Degree <input type="checkbox"/> Teacher's Certification Only	
<i>*If seeking a second bachelor's degree, you must submit a Post-Baccalaureate certification form.</i>		
Date you expect to complete your degree program (mm/yy):		
Have you ever attended a college, university, business, or trade school?	<input type="checkbox"/> No, I have never attended a college, university, business or trade school. <input type="checkbox"/> Yes, I have attended a college, university, business or trade school.*	
* Please list the the college(s), universities, or trade school(s) that you have previously attended below:		
School Name	Date(s) Attended	
	_____/_____/_____ to ____/____/_____	
	_____/_____/_____ to ____/____/_____	
	_____/_____/_____ to ____/____/_____	
	_____/_____/_____ to ____/____/_____	
	_____/_____/_____ to ____/____/_____	
Are you concurrently enrolled at another institution? <input type="checkbox"/> Yes* <input type="checkbox"/> No		
<i>*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.</i>		

UHD ID: _____ Student's First Name: _____ Last Name: _____

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

Yes* No

If "Yes," please explain:

STEP 2: 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 for you. The letter must be mailed directly from the sponsor to our office. The letter should include:
 - 1. Your name
 - 2. Your UHD ID number
 - 3. A statement explaining why your sponsor cannot continue to support you. The sponsor must be specific as to what changes have occurred that prohibit continued financial sponsorship.
 - 4. The letter must be notarized.
 - 5. **The letter must be in English or have an English translation included with the letter.**

STEP 3: Certification

Do not sign until you have carefully read the statements below. You will be held responsible for this information.

- 1. I will consult with and inform the Office of Scholarships and Financial Aid 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 receipt of institutional scholarship funds may reduce or cancel my Non-Resident TPEG grant.
- 3. 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 Office of Scholarships and Financial Aid for the purpose of determining my eligibility for financial aid is true and correct to the best of my knowledge.

Student Signature

(Black or blue ink, no electronic signatures accepted)

Date