



SOKA UNIVERSITY

Financial Aid Application

SECTION A

Postmark Deadline: March 2, 2011
(DOCUMENTS CANNOT BE FAXED OR EMAILED)

SUA ID: _____
(CONTINUING STUDENTS)

2011 Academic Level: First-year Sophomore Junior Senior

Please type or print clearly.

Name _____
LAST (FAMILY) FIRST MIDDLE

Permanent Home Address _____
NUMBER STREET APT. NO.

_____ CITY STATE/PROVINCE COUNTRY POSTAL CODE

Permanent Phone Number _____
TELEPHONE E-MAIL

Marital status as of today: I am single, divorced or widowed I am married I am legally separated

Date of Birth _____ Gender: Male Female
MONTH DAY YEAR

Check here if you were born before January 1, 1988.
(If you can check this box you can skip sections C and D, and do not need your parent's signature.)

**SECTION B
STUDENT
TAX FORM
AND INCOME
INFORMATION**

Check one of the boxes below and follow instructions.

- Check here if you had no earnings in 2010 and are NOT required to file a 2010 foreign or U.S. income tax return.
- Check here if you had earnings in 2010 and filed a U.S. income tax return or foreign tax return. Please attach a copy of the 2010 federal income tax return or foreign tax return covering January 1, 2010 - December 31, 2010 that has been officially translated into English and converted into U.S. dollars. Both the original and converted copies are required.

Please note: The income information must clearly indicate all income earned and all taxes paid.

Source of income: _____
EMPLOYER AMOUNT (U.S. \$)

Total current balance of all cash, savings and checking accounts (U.S. or international). Official bank statements must be submitted with the application.

\$ _____ (MUST be officially translated into English and converted into U.S. dollars.)
SELF

**SECTION C
PARENTS
TAX FORM
AND INCOME
INFORMATION**

Check one of the boxes below and follow instructions.

Check here if your parents filed a tax return and attach an officially translated copy with all figures converted into U.S. dollars.
Please note: The income statement must clearly indicate income earned and taxes from January 1, 2010 - December 31, 2010. Both the original and converted copies are required.

Check here if your parents did work and will NOT file a 2010 tax return.
If your parents will NOT file a 2010 tax return, list employer(s) below and ANY income received from January 1, 2010 - December 31, 2010.
Please note: You will need to send official documentation of this income.
Source of Income:

FATHER/STEPFATHER/LEGAL GUARDIAN'S EMPLOYER	AMOUNT (IN U.S. DOLLARS)
MOTHER/STPMOTHER/LEGAL GUARDIAN'S EMPLOYER	AMOUNT (IN U.S. DOLLARS)
TOTAL INCOME (IN U.S. DOLLARS)	

Total current balance of cash, savings and checking amounts (official bank statements must be submitted with the application):

\$ _____ (MUST be officially translated into English and converted into U.S. dollars.)
PARENT/GUARDIAN

Current net worth of investments: Include real estate – other than the home you live in – trust funds, money market funds, mutual funds, certificates of deposits, stocks, bonds and other securities. (For real estate property please subtract investment debt from value.):

\$ _____ (MUST be officially translated into English and converted into U.S. dollars.)
PARENT/GUARDIAN

Current net worth of business (business value minus business debt):

\$ _____ (MUST be officially translated into English and converted into U.S. dollars.)
PARENT/GUARDIAN

SECTION D

Parent(s) Household Information

List the people in your parents' household. Please include: yourself, your parents and your siblings (if living at home).

FULL NAME	AGE	SELF	NAME OF UNIVERSITY*	
FULL NAME	AGE	MOTHER		
FULL NAME	AGE	FATHER		
FULL NAME	AGE	RELATIONSHIP	NAME OF UNIVERSITY* (IF ATTENDING)	WILL BE ENROLLED FALL 2011? <input type="checkbox"/> YES <input type="checkbox"/> NO
FULL NAME	AGE	RELATIONSHIP	NAME OF UNIVERSITY* (IF ATTENDING)	WILL BE ENROLLED FALL 2011? <input type="checkbox"/> YES <input type="checkbox"/> NO
FULL NAME	AGE	RELATIONSHIP	NAME OF UNIVERSITY* (IF ATTENDING)	WILL BE ENROLLED FALL 2011? <input type="checkbox"/> YES <input type="checkbox"/> NO

*Must be under 24 years of age and enrolled in at least two courses or the equivalent of six units leading toward their first degree or certificate.

Total number in household: _____ Total number in university: _____ (DO NOT INCLUDE PARENTS IN NUMBER IN UNIVERSITY)

SECTION E

Signatures: By signing this form, we certify that all the information reported herein for consideration of financial assistance is complete and correct. Must be signed by student and at least one parent.

Student's Name (print) _____
LAST FIRST MIDDLE

SIGNATURE OF STUDENT _____ DATE _____

Parent's Name (print) _____
LAST FIRST MIDDLE

SIGNATURE OF PARENT _____ DATE _____

Mail this form with ALL required documentation by May 1, 2011 to:

Soka University
Office of Financial Aid
1 University Drive
Aliso Viejo, CA 92656