

Office of Financial Aid

Instructions for Completing the Soka International Student Financial Aid Application

This form should be completed by all international non-U.S. resident students applying to Soka University, for classes beginning in the Fall of 2018, who are applying for any type of financial aid.

You must submit your completed application, along with all required supporting documents, via mail or in-person, by the following deadline!

Application Submission Deadlines
 Incoming (First-Year) Students: **February 15, 2018**
 Continuing Students: **March 2, 2018**

- **Collect the following documentation to assist with completing this application:**
 - **Tax Returns and Income Documentation:**
 - **Non-U.S. tax returns** – Returns must show ‘Total Income’ and ‘Total Tax Assessed’ amounts.
 - **U.S. tax returns** – This includes tax transcripts, IRS Form 1040NR, or IRS Form 1040.
 - **For non-tax return filers** – Income documentation that shows ‘Total Income’.
 - **NOTE:** Tax and income figures should reflect the most recent 12-month tax or fiscal period. The traditional United States “calendar” tax period is January 1, 2016 to December 31, 2016. If you (or your spouse) filed taxes in a country that uses a “fiscal” tax period (such as July 1, 2015 to June 30, 2016), include income and tax documents for **both** 2015 and 2016.
 - **Bank, Brokerage, and Investment Account Statements.** Do not include “retirement” accounts.
 - **Investment Real Estate Information**
 - **Grant and Scholarship Documentation**
 - **Any other miscellaneous funds earned or paid to you, or business or asset owned by you.**
- All non-English language documents must be submitted in English-translated form and include an official translation certification form.
- All monetary values must be submitted in both their local currency value and US dollar conversion value.
- You must complete **all** application sections. Do not leave any question or amount response blank. If a question does not apply, write “**N/A**” (for Not Applicable) where a response is requested, or enter a “**0**” if an amount is requested. Forms submitted with blanks will be considered incomplete and may delay receipt of financial aid.
- Submit additional sheets along with this application if more room is required to answer any question.
- Do not submit this cover page along with your application.
- **NOTE!: Soka University of America may request additional supporting documentation for any information or monetary figure submitted on this form.**



Office of Financial Aid

Name (Last, First, MI): _____

SUA Student ID#: _____

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Office of Financial Aid

Name (Last, First, MI): _____ SUA Student ID#: _____

SECTION A: DEMOGRAPHIC INFORMATION

PART A1: STUDENT (& SPOUSE) INFORMATION

Name (Last, First, MI): _____ SUA Student ID#: _____

Phone Number: _____ Date of Birth: _____

*Country of Citizenship: _____ Email Address: _____

* NOTE: If you are a US citizen or a permanent resident, STOP HERE. You must apply to SUA as a Domestic Student.

Marital Status: Single *Married **Separated **Divorced Widowed

* Name of Spouse (if Married): _____

** Date of Separation (if Separated or Divorced): _____

Dislocated Workers/Displaced Homemakers

1) As of today, are either you or your spouse a “dislocated worker” or “displaced homemaker?”

Yes No

(A person is considered “dislocated” if he/she meets one of the following conditions: (a) has lost his/her job, (b) has been laid off, (c) is receiving unemployment benefits due to layoff, (d) was self-employed, but is now unemployed due to economic conditions or natural disasters.) (Verification documentation may be requested.)



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PART A2: FAMILY INFORMATION

1) List the people in your household. Please include:

- Yourself, and your spouse (if married).
- Your dependent children, even if they do not live with you. List only family members whom you provide more than half of their support OR, family members that would be required to provide your information when applying for student aid. Do not include foster children.
- Other members; only if: (a) they live with you, **AND** (b) you provide more than half of their support, **AND** (c) will continue to provide support from July 1, 2018 through June 30, 2019.
- College information for any household member that will enroll in college at least half-time during the 2018-2019 academic year.

Full Name of Household Member	Relationship to Student	Born on or after January 1, 1995	List only family members who will enroll at least half-time in college in 2018-2019*		
			Name of College	Type of Degree	Year in College for 2018-2019
	Self	XXXX	Soka University		
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
		<input type="checkbox"/> Yes <input type="checkbox"/> No			

* Verification of College Enrollment may be requested at a later date. Please note that we will not consider college enrollment for: (a) parents, (b) foster children, or (c) family members attending a foreign college, military schools, non-financial aid recipient colleges, or those enrolled in graduate/professional schools.

2) If any member of your household (listed in the previous table) is not your spouse or child, please explain how and why your family is financially supporting this person:



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SECTION B: INCOME, TAX, & CURRENCY INFORMATION

PART B1: NON-U.S. TAX RETURN FILERS

Answer the following questions regarding non-U.S. tax return filings for non-U.S. income earned or gained.

2016 Non-U.S. Tax Return Filer Information		
	STUDENT	SPOUSE
Check the box for any person that filed a <u>non-U.S. tax return</u> for the 2016 tax year. If your home country is not on a calendar tax year, use the 2015-2016 and 2016-2017 tax years.	<input type="checkbox"/>	<input type="checkbox"/>
FOR ALL PERSONS WITH BOXES CHECKED IN THE QUESTION ABOVE: <ol style="list-style-type: none"> Attach original tax documents. Include a signed, translated, notarized copy of the tax document(s). Tax document submissions must have all figures converted to U.S. dollars, and currency conversion information (symbol, rate, & date) clearly stated. Complete the following section, PART B2, using the currency conversion information from the translated tax documents. 		

PART B2: HOME CURRENCY RATE INFORMATION

Complete the information in the table below for your local home currency rate vs. the U.S. dollar:

- If you and/or your spouse filed a non-U.S. tax return, use the currency conversion information supplied with the **signed, translated, notarized copy of the tax document** requested in the previous section **PART B1** to complete the table below.
OR; if you did not file, or were not required to file, a non-U.S. tax return:
- Obtain currency conversion information from the following website: www.xe.com/currencyconverter

Local Currency Symbol (e.g., Japan = JPY)	Currency Conversion Date (e.g., Today's Date)	Currency Conversion Rate (to four decimal places) {Value of one home currency unit vs. one US dollar}

IMPORTANT: Use the information above to calculate currency conversions for ALL monetary values submitted throughout this form!



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PART B3: TAX RETURN NON-FILERS

2016 Tax Return Non-Filer Information		
	STUDENT	SPOUSE
1) Check the box for any person that <u>did not</u> earn ANY income in 2016.	<input type="checkbox"/>	<input type="checkbox"/>
2) Check the box for any person that <u>did</u> earn income in 2016, and <u>was not</u> required to file a 2016 tax return.	<input type="checkbox"/>	<input type="checkbox"/>
<p>FOR ALL PERSONS WITH BOXES CHECKED FOR QUESTION #2 ABOVE:</p> <p>If they worked <u>in</u> the U.S.: Attach IRS Form W-2 for all sources of income. For any sources of income for which they do not have an IRS Form W-2, please attach a signed statement listing these sources of income, the amounts earned from each source, and an explanation of why they are unable to provide a W-2 form.</p> <p>If they worked <u>outside</u> of the U.S.: Attach income statement forms for all sources of income. For any sources of income for which they do not have an official statement of income, please attach a signed statement listing these sources of income, the amounts earned from each source, and an explanation of why they are unable to provide an official statement of income form. Provide monetary values in both U.S dollars and local currency amounts, using the currency conversion information from section PART B2.</p>		

PART B4: U.S. IRS 1040NR TAX RETURN FILERS

2016 U.S. IRS 1040NR Tax Filer Information		
	STUDENT	SPOUSE
Check the box for any person that <u>filed</u> , or <u>will file</u> , a U.S. IRS 1040NR tax return (U.S. Non-Resident Alien Income) for 2016.	<input type="checkbox"/>	<input type="checkbox"/>
<p>FOR ALL PERSONS WITH BOXES CHECKED FOR THE QUESTION ABOVE:</p> <p>Attach an official copy of any completed tax form, or an official tax transcript, and submit with this application.</p>		



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PART B5: TOTALS – TOTAL INCOME & TOTAL TAX ASSESSED

Enter the Total Income & Total Tax Assessed values in the table below by adding the figures obtained from forms gathered in sections PART B1, PART B3, and PART B4.

The figures entered below should represent income totals, regardless of income origin.

Be sure to list totals in both ‘Home Currency’ and ‘U.S. Dollars’, using the currency conversion information in section PART B2. If income was earned in the U.S., enter “N/A” in the ‘Home Currency’ column.

2016 Total Income & Total Tax Assessed Information			
List the following totals for any person who earned any income in 2016 (or fiscal year 2015-2016)		Home Currency	U.S. Dollars
STUDENT	Total Income		
	Total Tax Assessed		
SPOUSE	Total Income		
	Total Tax Assessed		

PART B6: UNTAXED INCOME INFORMATION

2016 Untaxed Additional Income Information	STUDENT	SPOUSE
	Totals from 1/1/16 to 12/31/16 (U.S. dollars)	
List the ‘Total Child Support’ received for any of your children. Do not include foster children.		
List the total of housing, food, and other living allowances paid to any members of the military, clergy, or others (including cash payments and cash value of benefits). Do not include the value of on-base military housing or the value of a basic military allowance for housing.		
List the total of any other money you and/or your spouse received on your behalf that is not reported elsewhere on this form. (e.g., bills paid for you, etc.)		



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PART B7: ADDITIONAL FINANCIAL INFORMATION

2016 Additional Financial Information				
List the 'Total Child Support' paid out because of divorce or separation. Do not include support for family members listed in the table located in the FAMILY INFORMATION section of this form.				
Full Name of Person Who Paid Child Support	Full Name of Child for Whom Support was Paid	Age of Child	Full Name of Person to Whom Support was Paid	Total Paid

PART B8: OUTSIDE FUNDING INFORMATION

List ANY outside funding paid, or that will be paid, directly to you for the upcoming 2018-2019 academic year in the form of a scholarship, grant, or loan.

For each item listed below, submit documentation providing details for the funding.

IMPORTANT NOTE: If you receive notification of ANY additional Outside Funding after submitting this application, you are required to immediately notify the SUA Office of Financial Aid.

2018-2019 School Year - Outside Funding Information		
Name and Source of Funding	Type of Funding	Amount of Funding (U.S. dollars)
	<input type="checkbox"/> Scholarship <input type="checkbox"/> Grant <input type="checkbox"/> Loan	
	<input type="checkbox"/> Scholarship <input type="checkbox"/> Grant <input type="checkbox"/> Loan	
	<input type="checkbox"/> Scholarship <input type="checkbox"/> Grant <input type="checkbox"/> Loan	



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SECTION C: BANK ACCOUNTS, INVESTMENTS, & ASSETS

Provide information for accounts and assets held by you and/or your spouse.

List the total balance for each account type as of the date of this application. Use the currency conversion information you submitted in **PART B1** of this form to calculate U.S. dollar amounts for foreign accounts.

Be sure to check the appropriate box for any person who does NOT hold an account.

IMPORTANT NOTE: SUA may request copies of statements for verification of balances for any account listed.

PART C1: BANK ACCOUNTS

List total bank (savings or checking) account balance information for yourself and/or your spouse.

Bank Account Balance Information (Checking and Savings)			
Provide the TOTAL of ALL checking and savings accounts whether domestic or foreign.			
	Home Currency Balance	U.S. Dollar Balance	Check if this person has no account.
STUDENT Account 1			<input type="checkbox"/>
STUDENT Account 2			
SPOUSE Account 1			<input type="checkbox"/>
SPOUSE Account 2			

PART C2: INVESTMENT ACCOUNTS

List the Total Net Worth of all investment accounts held for each individual.

These accounts include: Brokerage accounts, Trust funds, UGMA and UTMA accounts, Money market funds, Mutual funds, Certificates of deposit, Stocks, Stock options, Bonds, Other securities, Installment and Land sale contracts, Commodities, etc. Also include the value of all qualified education accounts such as Coverdell savings accounts, 529 college savings plans, and Refund values of 529 pre-paid tuition plans. NOTE: Do not include the value of life insurance policies or designated retirement plans (e.g., 401k, 403b, Pension funds, Annuities, Non-education IRAs, etc.)

Investment Account Balance Information (Brokerage Accounts, etc.)				
Owner	Account Type (brokerage, 529, etc.)	Home Currency Balance	U.S. Dollars Balance	Check if this person has no accounts.
STUDENT				<input type="checkbox"/>
STUDENT				
SPOUSE				<input type="checkbox"/>
SPOUSE				



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PART C3: INVESTMENT REAL ESTATE

Provide information for all investment real estate held by you and/or your spouse. Attach additional sheets if needed.

These properties include: Real estate other than your primary residence, Rental property, Mobile homes, Condos, Duplexes, Land, Summer homes, etc. **NOTE: Do not include a "primary residence" (i.e., a home that you primarily reside in).**

Investment Real Estate Information			
PROPERTY #1			
Property Address			
Held By	<input type="checkbox"/> Student	<input type="checkbox"/> Spouse	<input type="checkbox"/> Jointly
Original Purchase Price (USD)	Current Market Value (USD)	Current Mortgage Loan Balance (USD)	

PART C4: BUSINESS INFORMATION

Provide information for any businesses or investment farms owned by you and/or your spouse.

Do not include businesses with 100 or fewer full-time employees, or designated "family farms".

Documents will be sent to you requesting further information. Attach additional sheets if needed.

Business or Investment Farm Information				
BUSINESS #1				
Business Address				
Business Name & Nature				
Held By	<input type="checkbox"/> Student	<input type="checkbox"/> Spouse	<input type="checkbox"/> Jointly	Percent of Ownership Interest
Business Market Value (USD) (100% value, not % of ownership)	Business Debt (USD) (100% debt amount, not % of ownership)		Number of Full-time Employees	



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SECTION D: SUBMISSION INFORMATION

1) If you are a current Soka student, or an admitted Soka applicant, please review all "To Do List" items for incomplete items or missing documents at:

learn.soka.edu

- Locate the "To Do List" section on the right of the screen.
- Click the 'more' link to display an extended list of your To Do List items.
- Incomplete documents will display with a status of "Initiated" or "Notified".

2) Return this completed form to the Soka University Office of Financial Aid.

Please mail this form, or deliver this form in-person, along with include any supporting documents.

If you choose to submit information via email, SUA will not be responsible for any data security breach, and we may still request that you submit original documents.

<p>Applications can be mailed or delivered in-person to: Soka University of America Office of Financial Aid Founders Hall, Room 216 1 University Drive Aliso Viejo, CA 92656 USA</p>	<p>Website: www.soka.edu/financialaid Email: financialaid@soka.edu Phone: (949) 480-4342</p>
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For more information, please visit our website at: www.soka.edu/financialaid

SECTION E: SIGNATURE(S)

By signing this form, we certify that all the information reported on this application is complete and accurate to the best of our knowledge. Some information may be an estimate and will be confirmed and/or updated by the submission of verification documents (i.e., tax returns, bank statements, etc.) I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and that I may be subject to a fine.

 Student Name (print) Student Signature Date

 Spouse Name (if married) (print) Spouse Signature (optional) Date