

Instructions for Completing the Soka International Student Financial Aid Application

This form should be completed by international non-U.S. undergraduate resident students applying to Soka University, for classes beginning in the Fall of 2026, who are applying for any 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, 2026

Continuing Students: March 2, 2026

WARNING!: Late application or documentation submissions will result in a **reduction** of grants or scholarships.

- **Collect the following documentation to assist with completing this application:**
 - **Tax Returns and Income Documentation:**
 - **Non-U.S. tax 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:** ‘Income’ and ‘Tax Assessed’ figures should include the entire 12-month “2024 tax period”. The United States 2024 tax period is January 1, 2024 to December 31, 2024. If you or your parents filed taxes in a country that uses a “fiscal” tax period (such as July 1, 2023 to June 30, 2024), use/submit income and tax documents for **both** the 2023-2024 and 2024-2025 fiscal years; to include **all** 2024 income.
 - **Bank, Brokerage, and Investment Account Statements.** Do not include “retirement” accounts.
 - **Investment Real Estate or Business(es) owned by you or your parents.**
 - **Grant and Scholarship Documentation**
 - **Any other miscellaneous funds earned by, or paid to, you or your parents.**
- 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.
- Complete **all** application sections. Do not leave a question or amount response blank. If a question does not apply, use “**N/A**” (Not Applicable) where a response is requested, or use “**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.
- Students previously admitted to SUA should include their seven-digit “SUA Student ID#” on this form. First-time SUA applicants will not have an SUA ID# and should leave this field blank.
- **NOTE: Soka University of America may request additional supporting documentation for any information or monetary figure submitted on this form.**

Office of Financial Aid

Please use the appropriate conversion rate listed below when calculating all non-U.S. dollar monetary values in this application. Use this same currency rate when having your financial documents professionally translated. If you do not see your country listed, please contact the Soka Office of Financial Aid for the proper conversion rate. The Soka Office of Financial Aid reserves the right to **not** accept documents that use different conversion rates.

2026-2027 International Undergraduate Student Financial Aid Application (APPL)

Country	Currency	USD	Exchange Rate
Afghanistan	AFN	\$1	66.48
Albania	ALL	\$1	82.81
Argentina	ARS	\$1	1335.14
Australia	AUD	\$1	1.52
Bangladesh	BDT	\$1	122.08
Brazil	BRL	\$1	5.34
Bulgaria	BGN	\$1	1.67
Cambodia	KHR	\$1	4007.14
Cameroon	XAF	\$1	560.49
Canada	CAD	\$1	1.39
Chile	CLP	\$1	960.17
China	CNY	\$1	7.13
Congo (Kinshasa)	CDF	\$1	2697.22
Costa Rica	CRC	\$1	503.79
Denmark	DKK	\$1	6.37
Egypt	EGP	\$1	48.33
Estonia	EUR	\$1	0.85
Ethiopia	ETB	\$1	144.39
France	EUR	\$1	0.85
Georgia	GEL	\$1	2.70
Germany	EUR	\$1	0.85
Ghana	GHS	\$1	12.40
Honduras	HNL	\$1	26.24
Hong Kong	HKD	\$1	7.77
India	INR	\$1	88.67
Indonesia	IDR	\$1	16681.63
Israel	ILS	\$1	3.35
Italy	EUR	\$1	0.85
Japan	JPY	\$1	149.50
Kazakhstan	KZT	\$1	544.39
Kenya	KES	\$1	129.39
Kyrgyzstan	KGS	\$1	87.45
Liberia	LRD	\$1	181.19
Malawi	MWK	\$1	1735.78
Malaysia	MYR	\$1	4.22
Mexico	MXN	\$1	18.36

Country	Currency	USD	Exchange Rate
Mongolia	MNT	\$1	3596.98
Morocco	MAD	\$1	9.08
Myanmar	MMK	\$1	2099.43
Nepal	NPR	\$1	141.95
Netherlands	EUR	\$1	0.85
New Zealand	NZD	\$1	1.73
Nigeria	NGN	\$1	1486.44
Pakistan	PKR	\$1	283.20
Peru	PEN	\$1	3.49
Philippines	PHP	\$1	58.08
Poland	PLN	\$1	3.64
Portugal	EUR	\$1	0.85
Russia	RUB	\$1	83.66
Rwanda	RWF	\$1	1451
Singapore	SGD	\$1	1.29
Somalia	SOS	\$1	571.59
South Africa	ZAR	\$1	17.33
South Korea	KRW	\$1	1409.59
Spain	EUR	\$1	0.85
Sri Lanka	LKR	\$1	301.71
Sweden	SEK	\$1	9.4
Switzerland	CHF	\$1	0.79
Syria	SYP	\$1	13001.85
Taiwan	TWD	\$1	30.46
Tajikistan	TJS	\$1	9.34
Tanzania	TZS	\$1	2451.80
Thailand	THB	\$1	32.29
Tunisia	TND	\$1	2.914
Turkey	TRY	\$1	41.52
Uganda	UGX	\$1	3492.41
Ukraine	UAH	\$1	41.41
United Arab Emirates	AED	\$1	3.67
United Kingdom	GBP	\$1	0.74
Vietnam	VND	\$1	26554
Zambia	ZMW	\$1	23.76
Zimbabwe	ZWL	\$1	33582.68

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

SECTION A: DEMOGRAPHIC INFORMATION

Complete **all** application sections and fields leaving no question or amount response blank. If a question does not apply, write "**N/A**" (Not Applicable) where a response is requested, or "**0**" if an amount is requested. Forms submitted with blanks will be considered incomplete and may delay receipt of financial aid.

PART A1: STUDENT 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

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

PART A2: PARENT INFORMATION

NOTE!: If you (the student) were born before January 1, 2003, or are legally married, you are an "independent" student and may skip all parental information questions on this entire form.

The term "*parent*" refers to a biological parent, adoptive parent, or step-parent. If your parents are married or not married & living together, list the names of both parents, even if one is not working. If you live with one parent who has re-married, list the name of your biological parent and your step-parent. If your parents are divorced or separated, and not living in the same household, list only the parent you lived with more during the past 12 months.

Parent 1 Name: _____

Parent 2 Name: _____

Parents' Current Marital Status

☐ Single ☐ Married ☐ Re-Married ☐ **Separated ☐ **Divorced ☐ Widowed

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

Dislocated Workers/Displaced Homemakers

As of today, are either of your parents 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.)

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

PART A3: FAMILY HOUSEHOLD INFORMATION

List the people living in your parent(s)' household. Please include:

- Yourself (even if you do not live with your parents); and your parent(s) {including a step-parent}.
 - If your parents are divorced or separated, include the parent that **lives in** the household.
- Your parent(s)' other dependent children, even if not living with your parent(s). List only family members your parent(s) provide more than half of their support for, **OR** family members that would be required to provide your parent(s)' information when applying for student aid. Do not include foster children.
- Other members; only if: (a) they live with your parent(s), **AND** (b) your parent(s) provide more than half of their support, **AND** (c) they will continue to provide support from July 1, 2026 through June 30, 2027.
- College information for any household member that: (a) will enroll in college at least half-time during the 2026-2027 academic year, **AND** (b) was born on or after January 1, 2003, **AND** (c) will be enrolled in an undergraduate degree, diploma, or certificate.

Full Name of Household Member	Relation to Student	Date of Birth (MM/DD/YYYY)	Information for family members born on or after January 1, 2003; who will enroll at least half-time in college during 2026-2027*		
			Name of College	Type of Degree (BA, MA, etc.)	Year in College for 2026-2027 (1, 2, 3, or 4)
	Yourself		Soka University		

* Verification of college enrollment may be requested from you 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, a military school, a non-financial aid recipient college, or those enrolled in graduate/professional schools.

If any member of your household (listed in the previous table) is NOT a parent or brother/sister, please explain how and why your family is financially supporting this person:

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

SECTION B: INCOME AND TAX INFORMATION

Complete **all** application sections and fields leaving no question or amount response blank. If a question does not apply, write "**N/A**" (Not Applicable) where a response is requested, or "**0**" if an amount is requested. Forms submitted with blanks will be considered incomplete and may delay receipt of financial aid.

PART B1: TAX RETURN NON-FILERS (Did not file ANY tax returns, in any country.)

2024 Tax Return Non-Filer Information	STUDENT	PARENT 1	PARENT 2
	For each person listed, check only one box for either Question 1 or Question 2, but not both!		
1) Check the box for any person that <u>did not</u> earn ANY income in 2024.	☐	☐	☐
2) Check the box for any person that <u>did</u> earn income in 2024, and <u>was not required to file a 2024 tax return.</u>	☐	☐	☐

FOR ALL PERSONS WITH BOXES CHECKED FOR QUESTION #2 ABOVE:

If they worked in 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.

If they worked outside 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 the chart on **Page 2**.

PART B2(a): TAX RETURN FILERS (Filed a tax return in a country other than the United States.)

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

2024 Non-U.S. Tax Return Filer Information	STUDENT	PARENT 1	PARENT 2
Check the box for any person that filed a <u>non-U.S. tax return</u> for the 2024 tax year. If your home country is on a fiscal year, and not on a calendar tax year, use both the 2023-2024 and 2024-2025 tax years.	☐	☐	☐

FOR ALL PERSONS WITH BOXES CHECKED IN THE QUESTION ABOVE:

1. Attach all original tax documents. **Include a signed, translated, notarized copy of each tax document.**
2. Tax document submissions must have all monetary figures converted to U.S. dollars using the currency conversion rates listed in the chart on **Page 2**. Currency conversion information (symbol, rate, & date) must be clearly stated.

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

PART B2(b): TAX RETURN FILERS, continued (Filed a U. S. tax return for non-residents of the U. S.)

Answer the following questions for any non-U.S resident that filed a U.S. IRS 1040NR tax form.

2024 U.S. IRS 1040NR Tax Filer Information			
	STUDENT	PARENT 1	PARENT 2
Check the box for any person that filed, or will file, a U.S. IRS 1040NR tax return (U.S. Non-Resident Alien Income) for the 2024 tax year.	☐	☐	☐
FOR ALL PERSONS WITH BOXES CHECKED FOR THE QUESTION ABOVE: Attach an official copy of any completed tax form, or an official tax transcript, and submit with this application.			

PART B3: TOTAL INCOME & TOTAL TAX ASSESSED

Enter the 'Total Income' & 'Total Tax Assessed' values into the table below by adding the figures obtained from forms gathered in sections PART B1 and PART B2.

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 chart on **Page 2**. If income was earned in the U.S., enter "**N/A**" in the 'Home Currency' column.

2024 Total Income & Total Tax Assessed Information					
List the following totals for any person who earned any income in 2024 (*see NOTE below)		Home Currency	U.S. Dollars	FOR OFFICE USE ONLY Leave these blank	
STUDENT	Total Income				
	Total Tax Assessed				
PARENT 1	Total Income				
	Total Tax Assessed				
PARENT 2	Total Income				
	Total Tax Assessed				

* **NOTE:** 'Income' and 'Tax Assessed' figures should include the entire 12-month "2024 tax period". The United States 2024 tax period is January 1, 2024 to December 31, 2024. If you or your parents filed taxes in a country that uses a "fiscal" tax period (such as July 1, 2023 to June 30, 2024), use/submit income and tax documents for both the 2023-2024 and 2024-2025 fiscal years; to include **all** 2024 income.

Name (Last, First, MI): _____

SUA Student ID#: _____

PART B4: UNTAXED INCOME INFORMATION

2024 Untaxed Additional Income Information	STUDENT	PARENT(S)
	Totals from 1/1/24 to 12/31/24 (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 or your parents received on your behalf that is not reported elsewhere on this form. (e.g., bills paid for you, etc.)		

PART B5: ADDITIONAL FINANCIAL INFORMATION

2024 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 PART A3: 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

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

SECTION C: BANK ACCOUNTS, INVESTMENTS, & ASSETS

Complete **all** application sections and fields leaving no question or amount response blank. If a question does not apply, write "**N/A**" (Not Applicable) where a response is requested, or "**0**" if an amount is requested. Forms submitted with blanks will be considered incomplete and may delay receipt of financial aid.

Please provide information for all accounts and assets held by you and/or your parents.

Calculate 'Home Currency' and/or 'U.S. Dollar' balances using the currency conversion chart on **Page 2**.

PART C1: ACCOUNT BALANCES AND NET WORTH

List total account balance information for yourself and your parents, as of the date of this application.

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

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

Accounts to include: Bank accounts (checking, savings, etc.), Brokerage (investment) 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. 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.

Accounts to exclude: Life insurance policies, Designated retirement plans (e.g., 401k, 403b, Pension funds, Annuities, Non-education IRAs, etc.)

Bank (Checking & Savings) and Brokerage (Investment) Account Balance Information					
Provide the TOTAL BALANCE for every account held at any domestic or international institution. Figures entered below should represent account balances as of the date of this application.					
Owner	Check box if person has no accounts.	Account Type (Bank, Brokerage, etc.)	Home Currency Balance	U.S. Dollars Balance	FOR OFFICE USE ONLY Leave these blank
STUDENT	☐				
STUDENT					
STUDENT					
STUDENT					
PARENT 1	☐				
PARENT 1					
PARENT 1					
PARENT 1					
PARENT 2	☐				
PARENT 2					
PARENT 2					
PARENT 2					

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

PART C2: INVESTMENT REAL ESTATE

IMPORTANT!: DO NOT include the primary residence that you or your parents live in on a daily basis.

Provide details for all investment real estate held by you or your parents. Attach additional sheets if needed.

"Investment Real Estate" includes: Real estate other than your primary residence, rental properties, mobile homes, condominiums, duplexes, land, summer homes, etc.

Investment Real Estate Information			
PROPERTY #1			
Property Address			
Held By	☐ Student	☐ Parent	
Original Purchase Price (USD)	Current Market Value (USD)	Current Mortgage Loan Balance (USD)	

Investment Real Estate Information			
PROPERTY #2			
Property Address			
Held By	☐ Student	☐ Parent	
Original Purchase Price (USD)	Current Market Value (USD)	Current Mortgage Loan Balance (USD)	

PART C3: BUSINESS INFORMATION

Provide information for any businesses or investment farms owned by you or your parents.

Documents may 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	☐ Student	☐ Parent	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	

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

SECTION D: OUTSIDE FUNDING

Complete **all** application sections and fields leaving no question or amount response blank. If a question does not apply, write "**N/A**" (Not Applicable) where a response is requested, or "**0**" if an amount is requested. Forms submitted with blanks will be considered incomplete and may delay receipt of financial aid.

List **ANY** outside funding that has been paid, or that will be paid, directly to you for the upcoming 2026-2027 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.

2026-2027 School Year - Outside Funding Information		
Name and Source of Funding	Type of Funding	Amount of Funding (U.S. dollars)
Example: Japanese Student Services Organization (JASSO)	☐ Scholarship ☒ Grant ☐ Loan	\$5,000
	☐ Scholarship ☐ Grant ☐ Loan	
	☐ Scholarship ☐ Grant ☐ Loan	
	☐ Scholarship ☐ Grant ☐ Loan	
	☐ Scholarship ☐ Grant ☐ Loan	

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

SECTION E: 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:

<http://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 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.

Applications can be mailed or delivered in-person to:

Soka University of America
Attn: Office of Financial Aid
Founders Hall, Room 216
1 University Drive
Aliso Viejo, CA 92656
USA

Website: www.soka.edu/financialaid

Email: financialaid@soka.edu

Phone: (949) 480-4342

For more information, please visit our website at: www.soka.edu/financialaid

SECTION F: 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. (If you were born before January 1, 2003; your parents do not need to sign this form.)

(This form requires handwritten signatures. Photocopies of handwritten signatures are permitted. Electronic, or typed, signatures will not be accepted.)

Student Name (print)

Student Signature (hand-written signature only, see note above)

Date

Parent Name (print)

Parent Signature (hand-written signature only, see note above)

Date