#### **Instructions for Completing the Soka Dream Financial Aid Application**

This **Soka Dream Financial Aid Application** is a Soka-specific application used to determine the financial aid **eligibility** of undergraduate students applying to Soka University who:

- Are **not** eligible to file a federal **FAFSA** application; **AND**
- Do not meet the qualifications for California Assembly Bill 540 (AB540), AB 130, and AB 131; and therefore cannot submit a state <u>California Dream Financial Aid Application</u>.

NOTE: This Soka Dream Financial Aid Application is used for university-based financial aid, not federal aid.

#### California Dream Financial Aid Application (CA AB540) Requirements for Eligibility

- If you DO meet the following requirements, submit a California Dream Financial Aid Application.
- If you DO NOT meet the following requirements, submit this Soka Dream Financial Aid Application.

#### California Dream Requirements (CA AB540) - Do you qualify?

- A) Attended a California high school for a minimum of three years; OR B) Attained credits, in California, for the California high school equivalent of at least three years or more of full-time high school coursework AND attained a total of three or more years of attendance in California elementary schools, California secondary schools, or a combination of those schools
- A) Have graduated, or will graduate, from a California high school; OR B) Attained a General Education Development (GED), High School Equivalency Test (HiSET), or Test Assessing Secondary Completion (TASC)
- Will register or enroll in an accredited and qualifying California college or university
- Do not currently hold a valid non-immigrant visa (F, J, H, L, A, B, C, D, E, etc.)
  - o NOTE: If you hold a Temporary Protected Status, or hold a "U" Visa, you may be eligible.

Students who have a Social Security Number issued after completing the Deferred Action for Childhood Arrivals (DACA) process are <u>not</u> eligible for <u>federal</u> financial aid. These students will be required to complete this Soka Dream Financial Aid Application, or complete the <u>California Dream Financial Aid Application</u>, even if they have a Social Security Number that was received through the DACA process.

### "Is the Soka Dream Financial Aid Application the correct application for me?"

- 1. I am a U.S. citizen (or a U.S. national):
  - a. If you are a U.S. citizen or U.S. national, you should file the FAFSA application at www.fafsa.gov
- 2. I am an "eligible non-citizen":
  - a. If you meet the definition of "eligible non-citizen," you should file the FAFSA at www.fafsa.gov
- 3. I am not "a citizen or eligible non-citizen":
  - a. If you are **not** "a citizen or eligible non-citizen", and **DO NOT** meet the CA AB540 requirements; you should complete this **Soka Dream Financial Aid Application**
  - b. If you are **not** "a citizen or eligible noncitizen", and **DO** meet CA AB540 requirements; you should complete the state **California Dream Act Application**, available at: https://dream.csac.ca.gov
- 4. I am an international student:
  - a. If you are an international student attending (or planning on attending) Soka University on a "F1 Student Visa", complete the Soka International Student Financial Aid Application, available at: <a href="https://www.soka.edu/financial-aid-tuition/aid-undergraduate-students/aid-international-undergraduates">https://www.soka.edu/financial-aid-tuition/aid-undergraduate-students/aid-international-undergraduates</a>

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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, 2022
Continuing Students: March 2, 2022

**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 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 "2020 tax period". The United States 2020 tax period is January 1, 2020 to December 31, 2020. If you or your parents filed taxes in a country that uses a "fiscal" tax period (such as July 1, 2019 to June 30, 2020), use/submit income and tax documents for **both** the 2019-2020 and 2020-2021 fiscal years; to include **all** 2020 income
  - Bank, Brokerage, and Investment Account Statements. Do not include "retirement" accounts.
  - o Investment Real Estate or Business(es) owned by you or your parents.
  - Grant and Scholarship Documentation
  - o 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.
- 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 <u>response</u> is requested, or enter a "**0**" if an <u>amount</u> 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 these cover pages 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.

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Name (Last, First, MI):	SUA Student ID#:
SECTION A: DEMOGRAPHIC INFORMATIO	V
	response blank. If a question does not apply, write " <b>N/A</b> " (Not Applicable) where 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:
State of Residence:	Email Address:
Citizenship Status: U.S. Citizen	☐ Eligible Non-Citizen
☐ NOT a Citizen or Eligible N	on-Citizen 🔲 International
• If you <b>are</b> a U.S. citizen or permanent resident, ST	OP HERE. You must complete a <u>FAFSA Application</u>
<ul> <li>If you are an international (non-U.S.) student, STC Student Application</li> </ul>	
Marital Status: ☐ Single ☐ Married ☐ *:  *Date of Separation (if Separated or Divorced):	Separated
PART A2: PARENT INFORMATION	
NOTE: If you (the student) were born before Jan "independent" student and may skip all parental	· · · · · · · · · · · · · · · · · · ·
The term "parent" refers to a biological parent, adoptive or not married & living together, list the names of both one parent who has re-married, list the name of your beare divorced or separated, and not living in the same during the past 12 months.	n parents, even if one is not working. If you live with iological parent and your step-parent. If your parents
Parent 1 Name:	
Parent 2 Name:	
Parents' Current Marital Status:	
☐ Single ☐ Married ☐ Re-Married ☐	**Separated
**Date of Separation (if Separated or Divorced):	

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Name (Last, First, MI):		SUA St	udent ID#: _		
PART A3: FAMILY HOUSEH	IOLD INFORM	ATION			
ist the people living in yo	our parent(s)'	household. Plea	se include:		
<ul> <li>Yourself (even if you         <ul> <li>If your paren</li> </ul> </li> <li>Your parent(s)' other your parent(s) provid provide your parent(s) <ul> <li>Other members; only of their support, ANE</li> </ul> </li> <li>College information f 2022-2023 academic undergraduate degree</li> </ul>	ts are divorced dependent chile more than hass)' information if: (a) they live of (c) they will contain any househows	or separated, included in the last of their support when applying for with your parent (ontinue to provide bld member that: (was born on or after the last of the	ude the parent that living with your parent for, <b>OR</b> family memberstudent aid. Do not s), <b>AND</b> (b) your paresupport from July 1, a) will enroll in colleg	eves in the hoot(s). List only bers that wou include foster ent(s) provide 2022 through ge at least half	usehold.  I family members Id be required to I children.  more than half I June 30, 2023. If-time during the
Full Name of Household	Relation to Student	Born on or	Information for family members born on or after January 1, 1999; who will enroll at least half-time in college during 2022-2023*		
Member		after January 1, 1999	Name of College	Type of Degree (BA, MA, etc.)	Year in College for 2022-2023 (1, 2, 3, or 4)
	Yourself	N/A	Soka University		,,,,,
		☐ Yes ☐ No			
		☐ Yes ☐ No			
		☐ Yes ☐ No			
		☐ Yes ☐ No			
		☐ Yes ☐ No			
		☐ Yes ☐ No			
•	ttending a foreign col	lege, a military school, a	non-financial aid recipient co	llege, or enrolled i	n
If any member of your hop please explain how and w	•	-	•		her/sister

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Name (Last, First, MI): \_\_\_

# 2022-2023 Soka Dream Undergraduate Student Financial Aid Application (APPL)

SUA Student ID#: \_\_\_\_\_

SECTION B: TAX AND INCOME INFORMATION						
Complete <b>all</b> application sections and fields leaving no question or amount response blank. If a question a <u>response</u> is requested, or " <b>0</b> " if an <u>amount</u> is requested. Forms submitted with blanks will be considere			• • •			
PART B1: TAX RETURN NON-FILERS (Did not file ANY tax returns, in a	any country	<b>/.</b> )				
	CTUDENT	DARFNIT 4	DARFNITA			
2020 Tax Return Non-Filer Information	STUDENT For each pers	PARENT 1 on listed, check or	PARENT 2			
	_	on 1 or Question 2				
1) Check the box for any person that did not earn ANY income in 2020.						
2) Check the box for any person that <u>did</u> earn income in 2020, and <u>was</u> <u>not</u> required to file a 2020 tax return.						
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. Provide currency conversion information.						
PART B2: TAX RETURN FILERS – Non U.S. Tax Return (Filed tax return in a country other than the U. S.)  Answer the following questions regarding non-U.S. tax return filings for non-U.S. income earned or gained.						
2020 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 2020 tax year. If your home country is on a fiscal year, and not on a calendar tax year, use both the 2019-2020 and 2020-2021 tax years.						

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. Currency

FOR ALL PERSONS WITH BOXES CHECKED IN THE QUESTION ABOVE:

conversion information (symbol, rate, & date) must be clearly stated.

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Name (Last, First, MI):	SUA Student ID#:
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#### 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 totals, regardless of income origin.

2020 Total Income & Total Tax Assessed Information				
List the following totals for any person who earned any income in 2020 (*see NOTE below)  U.S. Dollars				
STUDENT Total Income				
STODENT	Total Tax Assessed			
PARENT 1	Total Income			
FANCIVI 1	Total Tax Assessed			
PARENT 2	Total Income			
FANEIVI Z	Total Tax Assessed			

<sup>\*</sup> NOTE: 'Income' and 'Tax Assessed' figures should include the entire 12-month "2020 tax period". The United States 2020 tax period is January 1, 2020 to December 31, 2020. If you or your parents filed taxes in a country that uses a "fiscal" tax period (such as July 1, 2019 to June 30, 2020), use/submit income and tax documents for both the 2019-2020 and 2020-2021 fiscal years; to include all 2020 income.

#### PART B4: UNTAXED INCOME INFORMATION

	STUDENT	PARENT(S)	
2020 Untaxed Additional Income Information	Totals from 1/1/20 to 12/31/20 (U.S. dollars)		
Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings). Include amounts reported on the W-2 form in Boxes 12a –12d; Codes D, E, F, G, H, and S. <b>Do not include</b> code DD.			
List the 'Total Child Support' <b>received</b> for any of your, or your parents', children. <b>Do not include</b> 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). <b>Do not</b> include the value of on-base military housing or the value of a basic military allowance for housing.			
Veteran non-educational benefits, such as: Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.			
List the total of <b>any other</b> money you or your parents received on your behalf that is <b>not reported</b> elsewhere on this form. (e.g., bills paid for you, etc.)	N/A		

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#### PART B5: ADDITIONAL FINANCIAL INFORMATION

# List the 'Total Child Support' paid out in 2020 due to divorce or separation. Do not include support for family members listed in the table located in the PART A3: FAMILY HOUSEHOLD INFORMATION section of this form. Full Name of Person Who Paid Child Support Whom Support was Paid PARENT STUDEN

Full Name of Person	Full Name of Child for	Age	Full Name of Person to Whom Support was Paid	Total Paid (\$)	
Who Paid Child Support	Whom Support was Paid	of Child		PARENT	STUDENT

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

#### 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 ANY accounts.

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, Noneducation IRAs, etc.)

Bank (Check	Bank (Checking & Savings) and Brokerage (Investment) Account Balance Information				
		ery account held at any U.S. (domestic) or internare represent account balances as of the date of this			
Owner	Check if this person has no accounts.	Account Type (Bank, Brokerage, etc.)	U.S. Dollars Balance		
STUDENT					
PARENT 1					
PARENT 1					
PARENT 1					
PARENT 1					
PARENT 2					
PARENT 2					
PARENT 2					
PARENT 2					

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Name (Last, First, MI):			_ SUA Student ID#:		
PART C2: INVESTMENT	REAL ES	STATE			
IMPORTANT!: DO NOT i	nclude th	e primary residence that you or	your	parents <u>live in</u> on a daily basis.	
Provide details for all <u>inv</u>	<u>estment</u>	real estate held by you or your p	areı	nts. Attach additional sheets if needed.	
"Investment Real Estate" in condominiums, duplexes, la			side	nce, rental properties, mobile homes,	
		Investment Real Estate Info	orma	ation	
		PROPERTY #1			
Property Address					
Held By	1	☐ Student		☐ Parent	
Original Purchase Price	(USD) Current Market Value (U			Current Mortgage Loan Balance (USD)	
		Investment Real Estate Info	rma	ation	
		PROPERTY #2			
Property Address	1				
Held By	1	☐ Student		☐ Parent	
Original Purchase Price	(USD)	Current Market Value (USD)		Current Mortgage Loan Balance (USD)	
PART C3: BUSINESS INF	PART C3: BUSINESS INFORMATION				
D					

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

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					
	В	BUSINESS #1			
Business Address					
Business Name & Nature					
Held By	☐ Student	☐ Parent	Percent of Ownership Interest		
Business Market Value (US (100% value, not % of ownershi	•	Debt (USD) not % of ownership)	Number of Full-time Emplo	yees	

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Parent Name (print)

2022-2023 Soka Dream **Undergraduate Student Financial Aid Application** 

Date

	V
Name (Last, First, MI):	SUA Student ID#:
SECTION D. SURNAISSION INFORMATION	
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:	
http://learn.soka.edu	
<ul> <li>Locate the "To Do List" section on the right of the s</li> <li>Click the 'more' link to display an extended list of y</li> <li>Incomplete documents will display with a status of</li> </ul>	our To Do List items.
<b>2)</b> Return this completed form to the Soka Universal Please mail this form, or deliver this form in-person, along with	•
If you choose to submit information via email, SUA will not be remay still request that you submit original documents.	esponsible for any data security breach, and we
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: <a href="www.soka.edu/financialaid">www.soka.edu/financialaid</a> Email: <a href="mailto:financialaid@soka.edu">financialaid@soka.edu</a> Phone: (949) 480-4342
For more information, please visit our website at: <a href="https://www.soka.edu/financialaid">www.soka.edu/financialaid</a>	
SECTION E: SIGNATURE(S)	
By signing this form, we certify that all the information reported on this application is conformation may be an estimate and will be confirmed and/or updated by the submission of updated by the submission of updated that any false statements or misrepresentation may be cause for denial, remay be subject to a fine. (If you were born before January 1, 1999; your parents do not updated by the submission of	on of verification documents (i.e., tax returns, bank statements, etc.) eduction, withdrawal, and/or repayment of financial aid, and that I
(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-wri	itten signature only, see note above) Date

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

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