



JOHN CABOT UNIVERSITY JCU ASSISTANCE GRANT APPLICATION

DEADLINES TO SUBMIT APPLICATION AND SUPPORTING DOCUMENTATION:

New and Returning Students:

Fall: July 1st

Spring: November 15th

Need-Based Aid:

To qualify for the JCU Assistance Grant, you must demonstrate a legitimate need for financial aid, proving that without financial assistance it would be difficult to attend John Cabot University. The University will determine your “need” based on the information provided in the application and on the evaluation of all supporting documents. The assistance grant is awarded up to €2,250 (\$3000) annually.

Required Documentation:

You must submit the following materials along with the application to be considered for the grant. Applications will not be considered without the below accompanying documents, which must be translated into English if the original language is anything other than English or Italian:

- **US Citizens:**
 - FAFSA (returning students must submit an up to date FAFSA to demonstrate a change in need for financial assistance)
- **Italian Citizens:**
 - ISEE (returning students must submit a new ISEE to demonstrate a change in need for financial assistance)
- **International Students:**
 - Official Tax & Financial Statements or Declarations
 - Detailed Salary Certificate and Verification
 - Copy of Parent(s) Employment Contract, if unemployed, verification must be provided
 - Certificate verifying education costs for other family members, if applicable
 - Documentation verifying loans and/or other special family circumstances
 - Certificate of Family Assets: primary residence, other properties, liquid assets

***Please note:**

This Grant is awarded at the discretion of the John Cabot University Assistance Grant Committee. The Office of Financial Aid also reserves the right to request any additional information and/or to verify all information provided within the application and its’ supporting documents.

General Student Information

Student Name: _____

Permanent Address: _____

City: _____ Postal Code: _____ Country: _____

Telephone: _____

Email: _____

Date of Birth: _____ Male/Female: _____

Nationality: _____ Country of Origin: _____

New Student or Current Student: _____

Intended major or current major at JCU: _____

Semester you are applying for: Fall/ Spring: _____ Year: _____

Cumulative GPA

- High School GPA (if first semester applicant)
- Previous university GPA (if transferring)
- JCU Cumulative GPA (if current student)

Name of Institution	Public or Private	Address of School	GPA

Student Financial Information

Are you financially dependent or independent as recognized by your home country?

- If you are under 24, you are defined as a dependent unless otherwise documented or if you are married or have children.

Independent - or - Dependent

Are you receiving any external financial aid i.e. scholarships, loans, grants, or government funds?

- YES / NO: _____
- If yes, specify type of external financial aid: _____

- Amount (\$ or €): _____

Do you work outside of JCU or hold a Student Assistant position at JCU (if you are current student)?

- YES / NO: _____
- If yes, specify the job/position and company: _____

- Amount per month (\$ or €): _____

May we contact your employer to confirm the information you have provided?

- YES / NO: _____
- If no, please specify reason: _____

If you are independent and receive no external financial aid and/or do not work or if you are employed but your salary does not cover the cost attendance at JCU, how do you finance your studies? Do you receive financial assistance from any outside sources such as extended family, friends, government, etc.? Please be specific in your explanation and list the amounts, if applicable.

Family Occupation and Income

Students who have not submitted their FAFSA or ISEE information MUST complete this section

Mother's Name: _____

Occupation*: _____ Age: _____

Yearly Income: _____ Currency*: _____

Email: _____ Telephone: _____

Father's Name: _____

Occupation*: _____ Age: _____

Yearly Income: _____ Currency*: _____

Email: _____ Telephone: _____

***If parents are divorced or legally separated, and only one parent is contributing to the funding of your education you are only required to fill in one income.**

1. Are your parents divorced or separated? **YES / NO**

If so, which parent(s) are contributing to the funding of your education? Please specify.

2. Do you live at home during your studies? † **YES † NO**

If no, amount of monthly rent paid: _____

3. Medical Expenses (not covered by SS/INA, and in excess of 4% of income as they appear on your income tax form): _____

4. How many people are in your household including yourself? _____

5. Number of children in your family: ____ Do they attend private schools or colleges? **YES / NO**

If yes, list the approximate cost of educational fees for all children:

Name	Age	School, College, University	Grade	Tuition

6. Do any other family members or non-relatives live with you? _____

If yes, how much do they contribute to the household costs every year? _____

7. Please list any homes/real estate owned by your family (private or commercial), if applicable:

8. Please list any other assets, allowances and/or benefits your family may have or receive (stocks, bonds, savings, non-income expense accounts, motor vehicles, boats, government subsidies, etc.):

9. Does your family anticipate any significant changes in your family income this year? If so, please specify below:

10. Are there any special family circumstances that cause extra financial burdens on your family?

11. How much financial assistance would you require for the upcoming semester? _____

12. Please indicate if you have applied for any private grants or scholarships or if you have applied for any government aid. Specify approximate amounts, if applicable:

13. If there is any other relevant information we should be aware of and take into account while considering your request for additional finance aid, please give a brief explanation in the lines below:

*****CERTIFICATION*****

I declare to the best of my knowledge and belief that the information reported on this form is true, correct, and complete. John Cabot reserves the right to terminate any awarded grant if information included on this application is found to be false or you have misrepresented yourself during the application process. If the information provided here changes during your tenure at John Cabot University, it is your responsibility to update this information with the Office of Financial Aid.

Print Name: _____

Signature: _____ Date: _____