United Faith Christian Academy
International Student Financial Needs Assessment Form

International students who wish to apply for Financial Assistance must complete the following in full. The document must then be signed, notarized, and submitted to the Office of Operations for review by the Financial Assistance Committee.

Student Information:

Name of Student:_____
Last Name First Name Middle Name

Grade Level:_____ Completed grade Level at previous school:_____

Name of Previous School:_____

Address of Previous School:_____

_____

Parent Information:

Father's Name: _____
Last Name First Name Middle Name

Father's Occupation:_____

Father's Employer:_____

Father's Annual Income in US Dollars (US$)_____

Mother's Name: _____
Last Name First Name Middle Name

Mother's Occupation:_____

Mother's Employer:_____

Mother's Annual Income in US Dollars (US$)_____

Other Information:

Amount able to contribute to yearly tuition (in US dollars, US$):_____

I/we declare that the above information is valid and true to the best of my/our knowledge as of this date.

_____ _____
Signature of Father Date

_____ _____
Signature of Mother Date

_____ _____
Signature and Seal of Notary or Government Official Date