

PLEASE NOTE THAT YOU WILL NOT BE ABLE TO SAVE THIS FORM ON YOUR LOCAL DRIVE. BE SURE YOU HAVE ALL THE NECESSARY INFORMATION BEFORE YOU START FILLING IN THIS DOCUMENT.

Before you start, read our "[Information on Fellowships and Financial Aid](#)". The information requested below is necessary to help us assess your financial needs and best allocate the funds available. If you wish to be considered for SAIS Europe financial aid or any of the fellowships administered by SAIS Europe you must send proof of your parents' income (tax declaration or other relevant document) even if you do NOT consider yourself a dependent. **WITHOUT PROOF OF YOUR PARENTS' INCOME, YOUR APPLICATION FOR FINANCIAL AID CANNOT BE TAKEN INTO CONSIDERATION.**

IMPORTANT: AFTER YOU HAVE COMPLETED THIS FORM, PLEASE PRINT IT AND HAVE YOUR PARENTS SIGN IT. Once you have all the required signatures you should email the form with the supporting documents to finaidbologna@collaborate.johnshopkins.edu

PARENTS' OR GUARDIANS' SECTION: *Please have both parents OR guardian provide all the information requested below. If either parent is retired or deceased, please indicate previous occupation.*

Father's occupation:		Annual gross income in Euro €
Mother's occupation:		Annual gross income in Euro €
Indicate below type and value of other family assets (home(s), land, businesses and other investments) not included above:		
Number of dependents in family: Ages of dependents:		We can provide funding in the amount of Euro:
_____	_____	_____
father's signature	mother's signature	guardian's signature

APPLICANT'S SECTION:

Tuition at SAIS Europe for academic year 2013-14 is €31,533 and living expenses are estimated at €1,000 per month. Adding some extra funds for miscellaneous expenses, the estimated minimum student budget for 2013-14 is €47,000 for nine months.

AN ESTIMATED MINIMUM BUDGET OF €47,000 SHOULD BE EXPECTED FOR 2014-15.

PERSONAL RESOURCES: List below in EURO all the resources you expect to have available to cover tuition and living expenses.

Do not include among your resources grants or fellowships ADMINISTERED solely or jointly by SAIS Europe with/for donor organizations:		
Savings	Euro €	
Support from family	Euro €	
Other (relative, friend, loan)	Euro €	
Total Resources	Euro €	Amount of financial aid requested in Euro €

OTHER RESOURCES:

Have you applied to other organizations for a grant or fellowship that would enable you to attend the SAIS Europe? _____ If so, indicate amount, name of organization and expected date of notification: If not, state reason:
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Have you applied for admission or financial aid to attend other graduate programs? _____ If so, specify schools/programs: Have you applied for a loan? _____ If so, indicate amount: € _____ and lending institution: _____ If not, state reason:

EMPLOYMENT:

If you are employed, indicate occupation:	Annual gross salary in Euro €
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I hereby certify that all the information provided above is true and correct. I understand that I cannot be considered for any funds available unless all information and documents are submitted.

Signature:	Date:
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Any additional information that you feel is relevant may be attached in a separate statement.
Once you have completed this form, print it out and have your parents sign it. Then please email the signed form, along with your parents' supporting tax documents, to finaidbologna@collaborate.johnshopkins.edu. Please note that **INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**