



FINANCIAL AID APPLICATION 2022-23

FOR CANADIAN AND INTERNATIONAL NON-U.S. STUDENTS

SECTION 1: STUDENT PERSONAL INFORMATION

Applicant's Name: _____

TWU Student ID: _____

Program of Study: _____

Undergraduate Graduate/ACTS

SECTION 2: STUDENT FINANCIAL INFORMATION

Pre-Study Income (May – September)

Employment Income (total amount) \$ _____

Total savings by September \$ _____

Study Period Income (September - April)

Employment Income \$ _____

Estimated contribution from family \$ _____

Non-TWU Scholarships \$ _____

Sponsorships \$ _____

Other Funding or Income \$ _____

Total \$ _____

Assets:

What is the net worth of your investments? \$ _____

Type of Investment: _____

Date Purchased: _____

Total \$ _____

Do you own/lease a car/truck/motorcycle? Y N

Year: _____ Make: _____ Model: _____

Estimated Resale Value: \$ _____

QUESTIONS? Contact the Financial Aid Office at 604-513-2031 or at awards@twu.ca

SECTION 3: STUDENT RESIDENCE INFORMATION

During your pre-study period (May - September) will you be living in a home owned/rented/leased by your parents? Y N

During your study period (September – April) will you be living in a home owned/rented/leased by your parents? Y N

SECTION 4: STUDENT DEPENDENCY STATUS

What is your Marital Status? Single Single Parent Married*

** If married, please have your spouse fill out the Spousal Income Form (Section 5 on the next page)*

Did you graduate high school before December 2018? Y N

Have you spent 2 full years in the full-time labour force? Y N

Are you or were you, at the time of your 19th birthday, a youth in continuing care or custody of a director of child welfare? Y N

If you answered NO to all of these questions, your parents must complete the parental portion (see last page) in order to complete the application process.

My parents are required to fill out the parental portion Y N

Number of people in immediate family (including you, your spouse or parents, and eligible dependents) _____

CERTIFICATION

As witnessed by recognition here, I certify that all information given in this application is complete and true in every respect and all dollar figures are in Canadian funds.

Student Signature _____ Date _____

PLEASE RETURN TO:
Trinity Western University Financial Aid Office
Email: Awards@twu.ca Fax: 604.513.2159

Financial Aid Office Use Only

Processed by: _____ Date: _____

QUESTIONS? Contact the Financial Aid Office at 604-513-2031 or at awards@twu.ca

SECTION 5: SPOUSAL PORTION (Married Students Only)

Spousal Income Form:

Enter your gross income from line 150 of your last Income Tax Return \$ _____

Total Income Tax paid for last tax year \$ _____

Total CPP Contributions \$ _____

Total EI Contributions \$ _____

Other Deductions \$ _____

If other, please describe: _____

Employer Name _____

Number of people in immediate family (including yourself, spouse, and eligible dependents*) _____

Number of dependents that are currently in post-secondary (include spouse) _____

**Eligible dependents are defined as children who are 18 years or younger OR graduated high school in June 2018 or later AND are in full-time post-secondary studies AND are not married.*

SPOUSE CERTIFICATION

As witnessed by recognition here, I certify that all information given in this portion application is complete and true in every respect and all dollar figures are in Canadian funds.

Spouse Signature

Date

Spouse Name (PLEASE PRINT)

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Processed by: _____ Date: _____

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SECTION 5: PARENT PORTION

Student's Name: _____

TWU Student ID #: _____

Parent #1

Enter your gross income from line 150 of your last Income Tax Return \$ _____

Total Income Tax paid for last tax year \$ _____

Total CPP Contributions \$ _____

Total EI Contribution \$ _____

Other Deductions \$ _____

If other, please describe: _____

Employer Name _____

Parent #2

Enter your gross income from line 150 of your last Income Tax Return \$ _____

Total Income Tax paid for last tax year \$ _____

Total CPP Contributions \$ _____

Total EI Contribution \$ _____

Other Deductions \$ _____

If other, please describe: _____

Employer Name _____

Number of people in immediate family (yourself, spouse, and dependents*) _____

Number of dependents that are currently attending post-secondary _____

**Dependents are defined as children who are 18 years or younger OR graduated high school in June 2018 or later AND are in full-time post-secondary studies AND are not married.*

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PARENT CERTIFICATION

As witness by our recognition here, I/we certify that all information in this application is complete and true in every respect and all dollar figures are in Canadian funds.

Parent #1 Signature

Parent #2 Signature

Print Name

Print Name

Date

Date

All information provided on this form will be treated with the highest level of confidentiality. Information will be used in the determination of student financial need for purpose of TWU awards. Your information will not be shared with any other parties within or outside of Trinity Western University

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