

# Caltech Financial Aid

## 2017-18 CALTECH SUPPLEMENTAL AID APPLICATION

### Student Information

\_\_\_\_\_  
Last Name First Name M.I.

\_\_\_\_\_  
E-mail Address UID (Current students only)

\_\_\_\_\_  
Permanent Address (include apt. no)

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Phone Number (include area code)

\_\_\_\_\_  
Date of Birth

Expected graduation: Month \_\_\_\_\_ Year \_\_\_\_\_

Please check terms you plan to enroll in for academic year 2017-2018 (check all that apply):

- Fall  Winter  Spring

Please select your housing plans for academic year 2017-2018:

- Caltech-owned housing  Non-Caltech-owned housing  With Parents

### Parent(s)' Additional Expenses

Medical/Dental Expenses in 2016 that were not covered by insurance or reimbursed

*Include unreimbursed insurance premiums. Please explain the circumstances surrounding these expenses on a separate sheet of paper. (Note: The Federal Methodology which we use to award financial aid, includes an allowance for these expenses. Thus, we will only include the amount beyond what is included in the Federal formula.)*

Tuition paid in 2016 for dependent children for private elementary/secondary school

For how many dependent children?

**Don't include tuition paid for the student applicant or any family member currently enrolled in college. Don't include the student applicant in the number of children.**

School Name  School City and State

C015

IDOC ID

Expected **tuition** to be paid in 2017 for dependent children for **private** elementary/secondary school

For how many dependent children?

Support paid in 2016 to person not in the household (elder care, alimony)

To Whom

Relationship to Student

Support expected to be paid in 2017 to person not in the household

Childcare paid for children up to age 10

*(This expense can only be assessed if both parents attend school full-time, if one attends school full-time and the other is employed at least 25 hours per week, or if both parents are employed at least 25 hours per week. Single parents must either attend school full-time or be employed at least 25 hours per week.)*

Child's Name

Provider Name

Amount Paid

Child's Name

Provider Name

Amount Paid

Child Support paid in 2016

Child Support expected to be paid in 2017

Noncustodial Parent Contribution for student applicant's 2017-18 educational expenses (if applicable)

Parent's Educational Loans paid in 2016

*Include loans obtained by the parents for their own education or for the education of the student or the student's siblings. Do not include loans that the student or the student's siblings obtained for their own education and that the parents have agreed to repay.*

Type of Loan

Amount Borrowed

For Whom

Relationship to Student

### Parent(s)' Assets

List asset values as of the date that this form is completed.

Other Real Estate Value

*Do not include parents' primary residence*

Other Real Estate Debt

*Do not include parents' primary residence*

Investment Value

*Include money market funds, mutual funds, certificates of deposit, stocks, stock options, bonds, other securities, commodities, installment and land sale contracts. (Do not include the value of retirement accounts such as 401(k) or 403(b))*

C015

IDOC ID

Investment Debt

Coverdell Savings Account (combined value for all children)

Section 529 College Savings or  
Pre-Paid Tuition Plans (combined value for all children)

Cash, Savings, and Checking

### Explanations/Special Circumstances

Use the space below to explain any unusual expenses or special circumstances you would like us to consider when determining your eligibility for financial aid. Attach additional sheets and/or documentation as needed.

### Application Signature

By signing this application, we certify that all the information reported to qualify for federal student aid is complete and correct. **At least one parent must sign.**

Student Signature \_\_\_\_\_ Social Security # (last 4 digits) \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Parent Name \_\_\_\_\_ Date \_\_\_\_\_

Parent E-mail \_\_\_\_\_

**WARNING: IF YOU PURPOSELY GIVE FALSE OR MISLEADING INFORMATION ON THIS FORM, YOU MAY BE FINED AND/OR SENTENCED TO JAIL; YOU MAY ALSO LOSE YOUR ELIGIBILITY FOR FINANCIAL ASSISTANCE FROM CALTECH.**