



IWS Financial Aid Application for Jan 2021 Session

Your name: _____

Today's date: _____ Your birthdate: _____

Which class(es) will you be enrolled in for January 2021? _____

Are you including the IWS Financial Aid Asset Verification form? **Y / N** (circle Yes or No)

Are you including the following income information:

American citizens: 4506-T form and the first two pages of your most recent 1040 tax return. **Y / N**

Canadian citizens: your most recent Notice of Assessment. **Y / N**

Other international citizens: description of your occupation, income, and regular expenses. **Y / N**

Are you including a one-page letter explaining your financial situation and need? **Y / N**

Were you born in the USA? **Y / N** If no, where? _____

Do you reside in the USA? **Y / N** If no, where? _____

Does your primary ministry/work occur in the USA? **Y / N** If no, where? _____

Is your church/ministry context contributing to your studies? **Y / N** If yes, how much per semester? \$ _____

Do you receive a housing allowance? **Y / N** If yes, how much? \$ _____

Are you a choral musician or do you presently conduct a choir in your ministry? **Y / N**

If yes, briefly describe your involvement in choral ministry:

Do you play organ as part of your ministry setting? **Y / N**

If yes, briefly describe your setting and how often you play:

Are you ordained or pursuing ordination? **Y / N**

Your personal denominational affiliation: _____

Your ministry's denominational affiliation (if different): _____

State the exact amount of aid you are requesting for one semester (tuition only, no fees): \$ _____

Note: Financial aid resources at IWS are limited and the Fin Aid Committee endeavors to distribute these resources equitably to the greatest number of students possible. To this end, the Committee expects all applicants to request an amount that reflects their true need. All requests for full tuition will be returned unless the applicant can demonstrate that full tuition is their true need.

Are you requesting a payment plan (\$50 fee)? **Y / N**

Please scan and email your documents to finaid@iws.edu or fax them to 904-379-5534.

Your application must be submitted no later than November 20.