

International Student Hardship Fund Application for Consideration

This fund is intended only as a short-term financial solution for qualifying international students experiencing extreme financial difficulties. Funding for this program is provided by the Student Government Association (SGA) and is administered through the Office of Financial Aid, Jardine Hall 203. Students may only receive this grant ONCE in their academic career and the award cannot exceed \$1,000. Only students in a degree-seeking program are eligible; those in Intensive English, non-degree programs need not apply.

These funds cannot be used as the down payment required to establish a payment plan with Financial Operations for past due balances.

Requested Term:	Fall <input type="checkbox"/>	Spring <input type="checkbox"/>	Summer <input type="checkbox"/>
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Name: _____ myWSU ID#: _____
Last/Family First Middle

Local Address: _____
Street City State ZIP Code

Local Telephone: _____ WSU Email: _____

Credit Hours Completed at Wichita State (WSU): _____ WSU GPA: _____
Minimum of 12 for Undergraduates, 9 for Graduates

INSTRUCTIONS:

1. Write a statement, in 500 words or less, that explains your financial hardship including the amount you are requesting and where those funds will be applied.
2. Attach any supporting documentation.
3. Prepare a detailed report of your income and expenses during the past six (6) months AND a detailed estimate of income and expenses for the upcoming six (6) months. Please keep this to one page in length.
4. Attach a copy of the Certification of Financial Support for International Undergraduates or Graduates submitted to either International Education or the Graduate School to receive the I-20.
5. Email all documents to the Office of the Student Government Association for committee review.

Warning: If you receive aid based on incorrect information, you may have to return it. If you purposely give false or misleading information on this form, we reserve the right to permanently withdraw your scholarship.
Affirmation: By signing below, I certify that all information I have submitted is accurate and verified with supporting documentation.

Signature Date

PLEASE RETURN TO:

STUDENT GOVERNMENT ASSOCIATION
sga@wichita.edu