



2009-10 University Aid Application
Graduate and Professional Programs

Please type or print in ink

PROGRAM OF STUDY (check all that apply): [] Prosthetics - Fall Term (August) [] Orthotics - Fall Term (August)
[] Prosthetics - Winter Term (November) [] Orthotics - Winter Term (November)
[] Prosthetics - Spring Term (February) [] Orthotics - Spring Term (February)
[] Prosthetics - Summer Term (May) [] Orthotics - Summer Term (May)
2009-10 YEAR IN SCHOOL (check one): [] 1st Year [] 2nd Year [] 3rd Year [] 4th Year Other (List year):
Indicate the month/year you entered or expect to enter NU Indicate the month/year you expect to graduate

A. GENERAL INFORMATION:

1. Applicant's Name: Last Name First Name Middle Initial
2. Social Security Number: Date of Birth:
3. Citizenship: [] U.S. Citizen [] Permanent Resident [] International Student (Visa Type):
4. Permanent Address: Street Address Apt. # City State Zip Code
Permanent Telephone: () E-Mail Address:
Please provide dates during which permanent address is valid: From To
5. Local Address: Street Address Apt. # City State Zip Code
Local Telephone: () E-Mail Address:
Please provide dates during which current address is valid: From To

D. STUDENT’S (AND SPOUSES’S) ANTICIPATED GROSS INCOME:

Indicate the amount of **BEFORE-TAX (gross)** income you (and your spouse/prospective spouse, if applicable) expect to earn in each of the following categories for the periods indicated. Do **not** include federal work-study earnings. “OTHER income/benefits” include interest/dividend income, untaxed income and benefits, and income from sources *other* than work.

Enter “0” (zero) if *NONE*;
 “N/A” for question 2 if not married – do not leave any item blank.

	Each month of the 3 months prior to enrollment period	Each month during enrollment period
1. Student’s gross monthly earnings from work	\$ _____ / month	\$ _____ / month
2. Spouse’s/ prospective spouse’s gross monthly earnings from work	\$ _____ / month	\$ _____ / month
3. Student’s/ (prospective) spouse’s OTHER monthly income/benefits <i>Explain in Section I</i>	\$ _____ / month	\$ _____ /month

E. STUDENT’S (AND SPOUSE’S) ASSETS:

Indicate the amount of funds you (and your spouse/prospective, if applicable) expect to have available **at the start of your 2009-10 enrollment period at NU** in each of the following categories. *ENTER “0” (zero) if NONE; do not leave any item blank. Do not include financial aid funds received in prior years or income listed in Section D.*

1. Cash, savings, checking accounts:
 Account balance(s) at **START OF ENROLLMENT PERIOD** \$ _____
2. Stocks, bonds, certificates of deposit (CDs) – *itemize in Section I*:
 Total value at **START OF ENROLLMENT PERIOD** \$ _____
3. Trust funds (e.g., contingent, vested) – *explain in Section I*:
 Total value at **START OF ENROLLMENT PERIOD** \$ _____
4. IRAs/Roth IRAs/Pension Plans/ Retirement Plans – 401(K), 403(B) – *explain in Section I*:
 Total value at **START OF ENROLLMENT PERIOD** \$ _____
5. Other assets/investments – *explain in Section I*:
 Total value at **START OF ENROLLMENT PERIOD** \$ _____

F. OUTSIDE SCHOLARSHIP ASSISTANCE:

Please indicate any outside scholarship source(s) and the amount you anticipate to receive for the 2009-10 academic year:

Name of Organization/Foundation (source)	Anticipated Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____

G. OTHER ANTICIPATED FINANCIAL RESOURCES:

Indicate how much you will receive during the 2009-10 academic year:

1. Financial assistance from parents (*Discuss with your parents first*): \$ _____
2. Financial assistance from relatives other than parents: \$ _____
3. Reimbursement from current/prospective EMPLOYER: Taxed \$ _____ Untaxed \$ _____
 Amount PER TERM: \$ _____ \$ _____ \$ _____ \$ _____
Fall '09 Winter '09 Spring '10 Summer '10
4. Other resources available - *explain in Section I.* \$ _____

H. TAX RETURN STATUS

All tax-filing students and spouses/prospective spouses of students must submit a signed copy of their 2008 Federal Income Tax Return including all schedules and W-2 forms. Please select the item below that best corresponds to you and follow the appropriate instructions. **If you requested a filing extension, submit a copy of IRS Form 4868 (“Application for Automatic Extension of Time...”)**

- [] **A 2008 Federal Income Tax return has been or will be filed.**
*[Please enclose a signed copy of the tax return, schedules, and W-2 forms with this form if you checked this item. If your tax return is not yet completed, **check here** [] and submit your tax return separately as soon as it is completed.]*
- [] **A 2008 Federal Income Tax return was not filed. However, a 2008 foreign income tax form was filed.**
[Please enclose a signed copy of the foreign tax return with this form if you checked this item. Also, provide a signed statement that shows the conversion rate of foreign currency to U.S. dollars on the date you submit your tax return to the office of Financial Aid]
- [] **A 2008 Federal Income Tax return was not filed, and I am/we are not required to file a 2008 Federal Income Tax return.**
[Please report the income under each of the following categories if you checked this item. Also, enclose any W-2 forms you may have received. Report zero '0' for a given category if appropriate—DO NOT LEAVE ANY ITEM BLANK.]

A.	Student's income from work during 2008	\$ _____
B.	Spouse's income from work during 2008	\$ _____
C.	Unemployment compensation received during 2008	\$ _____
D.	Social Security benefits received during 2008	\$ _____
E.	Child support received during 2008	\$ _____
F.	Welfare benefits (e.g., AFDC/ADC) received during 2008	\$ _____
G.	Pension benefits received during 2008	\$ _____
H.	Interest income earned during 2008	\$ _____
I.	Dividends earned during 2008	\$ _____
J.	Capital gains earned during 2008	\$ _____
K.	Foreign income excluded during 2008	\$ _____
L.	Other income (specify type): _____	\$ _____
TOTAL:		\$ _____

I. EXPLANATIONS AND SPECIAL CIRCUMSTANCES:

Use the space below to provide required explanation(s) and/or to explain any special circumstances that you think will influence your eligibility for financial assistance. *(Attach an additional sheet of paper if more space is needed.)*

J. STUDENTS' RELEASE OF INFORMATION:

Do you authorize staff in the Office of Financial Aid, Chicago to disclose financial aid information to your parents, spouse and/or other relatives?

[] Yes [] No

Name of relative(s): _____ Relationship: _____

CERTIFICATION STATEMENT: I/We certify that the information I/we have provided is true and correct to the best of my/our knowledge. I/We understand that information from this form may be released to scholarship programs and/or designated donors of funds for which I am selected. I/We agree to notify the Office of Financial Aid, Chicago of any changes to the above information. Furthermore, I/we understand that if I/we have knowingly provided false and/or misleading information, I/we may be reported to the governing agency, which may result in possible penalties and/or revocation of funds for misrepresentation.

Student signature

Date signed

Spouse/prospective spouse signature

Date signed

Return completed application to: Northwestern University, Office of Financial Aid, Chicago, 710 N. Lake Shore Drive, Room 629, Chicago, Illinois 60611-3078.