

MASS Program

Financial Disclosure Form

Last Name	First	MI	SS#
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Street Address (Permanent)

City	State	Zip Code
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____(____)_____

Phone	Email
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University

Directions: To be completed by Financial Aid officer if applicable.

Do you plan to apply for any type of financial student aid for the upcoming fall semester?

_____ Yes _____ No

If the answer is "yes", please visit <http://www.psu.edu/dept/studentaid/> to apply.

Please itemize each of the following costs incurred at home university per semester and Financial Assistance student receives towards each. The dollar amounts should reflect the fall semester in which the student will be attending the MASS program. Please attach a copy of the most recent student spring university billing statement.

TUITION

Semester Tuition Rate	\$
Financial Assistance you receive towards tuition <i>(per semester)</i>	
Name of Scholarship	
1.	\$
2.	\$
3.	\$
Name of Grant	
1.	\$
2.	\$
3.	\$
Other	
1.	\$
2.	\$
3.	\$

ROOM AND BOARD

Semester Room cost	\$
Financial Assistance you receive towards room <i>(per semester)</i>	\$
Semester Meal Cost	\$
Financial Assistance you receive towards meals <i>(per semester):</i>	\$
You live at home and do not incur room and board expenses	<input type="checkbox"/> Yes

FEES

Total of all mandatory fees	\$
Financial Assistance you receive towards fees	\$
Name of Mandatory Fees	
1.	\$
2.	\$
3.	\$
4.	\$
5.	\$

