

STUDENT SUPPORT FUND APPLICATION FORM

Full name:

ID number:

Email:

Citizenship:

Your status at AUBG:

Continuing student

Incoming student (admitted for Fall '20)

Number of completed semesters at AUBG:

CGPA:

(to be completed by continuing students only; minimum 2.50 on a 4.00 scale required; must include Spring '20)

Admissions points:

(to be completed by AUBG; leave blank)

By completing this application form, I confirm that:

1. I am not a visiting student;
2. I am not an incoming exchange student;
3. I am not a full-tuition scholarship recipient;
4. I will be a full-time student during the term of the grant;
5. I will not be receiving a named scholarship for the term of the grant;
6. I will not take a leave of absence during the term of the grant.

Note: Any omissions or inaccurate information, false or misleading statement could jeopardize your study at AUBG and entitle AUBG to claim the repayment of all financial aid provided to you so far.

All awarded students of the Student Support Fund may be required to present proof of their written statements within a week after the announcement of the recipients.

(continued on next page)

Please read carefully and fill out all fields below. If a question is not applicable, mark the box as N/A (not applicable).

I. FAMILY INFORMATION

In answering the following question, please refer to your biological parents:

1. Parents' current marital status (check only one box):

- Married
- Divorced
- Mother living, father deceased
- Father living, mother deceased
- Parents not married
- Domestic Partnership
- Other (please specify):

2. How many persons, including you, are dependent upon the family income?

In the definition of family above, use the current family members (step-parents, if needed).

3. Has any of your parents passed away since January 2020? Please check:

- No
- Yes, one parent
- Yes, two parents

4. Do you have any dependents who are in school or university? Please check:

- Yes, (please specify the number)
- No

If "yes," please check private or public state school/university:

- Private
- Public

5. Does your family own or rent your primary residence?

- Own
- Rent
- Live with others

II. PARENTS EMPLOYMENT INFORMATION

6. Are your parents currently employed?

- Yes, one of my parents
- Yes, both of my parents
- No

(continued on next page)

Mother's Occupation:

Father's Occupation:

III. INCOME FROM EMPLOYMENT IN USD

(For the most recent five-month period, January-May 2020)

	Gross income	Net Income
Father:		
Mother:		
Other (step-parent):		
Total:		

7. Has a member of your family lost their employment since January 2020?

No

Yes, one of my parents

Yes, both of my parents

Yes, another key family member who contributes to the family budget (please explain):

8. Has any of your parents received any state unemployment benefits since January 2020?

Yes, one of my parents

Yes, both of my parents

No

If "yes", please specify the period and the level of unemployment compensation as % of the previous gross salary:

Period:

Level of compensation:

9. Has a member of your family retired since January 2020?

Yes

No

IV. INCOME FROM PRIVATE BUSINESS IN USD

10. Do any of your family members operate a business? Please check:

Yes

No

(continued on next page)

(continued on next page)

If “yes”, report below the annual figures for the most recent completed 2019 tax year. If more than one business, add up the results of all businesses.

	Revenue	Expenses	Profit (loss)
Father:			
Mother:			
Other (step-parent):			
Total:			

11. What is the type of private business?

V. OTHER INCOME IN IN USD

(For the most recent five-month period, January-May 2020)

	Pensions	Unemployment compensations	Alimony
Father:			
Mother:			
Other (step-parent):			
Total:			

	Social Security Benefits	Rent
Father:		
Mother:		
Other (step-parent):		
Total:		

12. Has the average monthly income of your family in 2020 declined by more than 10% compared to the average monthly income for the entire 2019? Please consider both employment income as well as income from other sources (e.g. private business, rent).

Yes, my family’s monthly income declined by _____ % compared to 2019
 No

13. Do any of your family members have savings? Please consider cash savings, savings in bank accounts, deposits and investments in tradeable market securities (stocks, bonds, etc.).

Yes (please indicate the amount in USD):
 No

14. Do you have savings? Please consider cash savings, savings in bank accounts, deposits and investments in tradeable market securities (stocks, bonds, etc.).

(continued on next page)

18. Is there any other information about you, or your family's financial circumstances, which you believe should be taken into account in deciding your request?

Yes (please set out the information, up to one page, on a separate sheet and attach it)

No

19. Declaration

I declare to the best of my knowledge that the information provided in this application is complete and correct. Any omissions or inaccurate information, false or misleading statement could jeopardize my study at AUBG and entitle AUBG to claim the repayment of all financial aid provided to me so far.

I understand that if I knowingly make an untrue representation or statement to receive a benefit or advantage from the AUBG Student Support Fund, I bear criminal responsibility under Bulgarian law for declaring incorrect data.

Signature:

Date:

(type in your full name)