

# UNIVERSITY OF BALAMAND

## FINANCIAL AID APPLICATION – AY 2021-2022

### INSTRUCTIONS

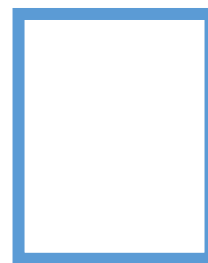
Newly applying students to UOB or continuing UOB students should submit a financial aid application filled by the applicant and his/her parents along with the required documents. Students can download the F.A. application through the following link: <http://www.balamand.edu.lb/FinancialAidApplication/>

Downloaded application should be filled and scanned with the necessary required documents and sent to the Office of Financial Aid at the following e-mail : [financial.aid@balamand.edu.lb](mailto:financial.aid@balamand.edu.lb) before end of June 2021. Official documents should be submitted to the office of Financial Aid located in the administrative building 2<sup>nd</sup> floor, at a later stage during the registration period.

Financial Aid applications are valid for one academic year only. A new application is required for each new academic year. Only complete applications (including all required documents) will be processed.

### Your application for Financial Aid must be accompanied with the following documents:

- Passport-size photograph of the applicant.
- Family Civil Status Record (not exceeding six months from the date of issue).
- Recent certificate of enrollment at school or university showing annual tuition fees for each dependent child in the family.
- Recent employment certificate(s) for job(s) held by each earning member of the family (**father - mother – siblings** (within the household)) clearly stating occupation, job title, years of service, income and benefits (e.g. educational benefits, accommodation, etc...). Employees should provide the NSSF Number of the company duly signed and stamped.
- For each member of the family who is (are) self-employed or unemployed, documentation should be provided by the Mayor of the town (المختار). The self-employed member should provide as well the Business Registration (سجل تجاري), income tax statements (ضريبة دخل), and the business bank statement of account for the last three years.
- Photocopy of recent **rental contract(s)** (عقد اجار) and/or **ownership deed(s)** (سندات ملكية) of house, resort, land and business premises (if applicable).
- Photocopy of **car(s) registration** form for each car owned by the family members.
- Photocopy of loan agreement(s), if any, with all supporting documents.
- Any additional document that would support the application for financial aid (e.g. medical reports and recent medical/hospital bills, certificate of job termination or end of service, etc...).



**FINANCIAL AID  
APPLICATION  
AY 2021-2022**

**PERSONAL INFORMATION**

**BIOGRAPHICAL INFORMATION:**

**ID#** \_\_\_\_\_

Full Legal Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last First Father

Gender: ☐ Male ☐ Female

Marital Status: ☐ Single ☐ Married ☐ Other \_\_\_\_\_

Nationality: ☐ Lebanese ☐ Other \_\_\_\_\_

Applicant's residence: ☐ On campus ☐ With Parents  
☐ Rented apartment: ☐ Private ☐ Shared  
☐ Other \_\_\_\_\_

Parents Address: \_\_\_\_\_ , \_\_\_\_\_  
Building / Floor Street  
\_\_\_\_\_  
Area City Country

Telephone: (home): \_\_\_\_\_ (Mobile): \_\_\_\_\_

Email address: \_\_\_\_\_ @ \_\_\_\_\_

Applicant's Address: \_\_\_\_\_ , \_\_\_\_\_  
Building / Floor Street  
\_\_\_\_\_  
Area City Country

Telephone: (home): \_\_\_\_\_ (Mobile): \_\_\_\_\_

Applicant's email address: \_\_\_\_\_ @ \_\_\_\_\_

## ACADEMIC INFORMATION

### Secondary school/transfer from other universities, class and major at time of application

High School	Years attended (from-to)	Financial aid received (if any)	Class completed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
University	Years attended (from-to)	Financial aid received (if any)	Class completed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### Faculty, class and major planned for 2021-2022

Faculty: ☐ Académie Libanaise des Beaux-Arts (ALBA)

☐ Faculty of Arts and Sciences (FAS)

☐ Faculty of Business and Management (FOBM)

☐ Faculty of Engineering (FOE)

☐ Faculty of Health Sciences (FHS)

☐ Issam M. Fares Faculty of Technology (IFFT)

☐ Faculty of Library and Information Studies (FLIS)

☐ Faculty of Medicine and Medical Sciences (FOM)

Major: \_\_\_\_\_ Class: \_\_\_\_\_

## FAMILY MEMBERS INFORMATION

### INFORMATION ON FATHER

Full Legal Name: \_\_\_\_\_ Year of Birth: \_\_\_\_\_

Marital Status: ☐ Married ☐ Separated ☐ Divorced ☐ Widowed

☐ if deceased, year of death: \_\_\_\_\_

**Current Work Status:** ☐ Employed ☐ Self-employed Starting Date: \_\_\_\_\_

Job Title/Position: \_\_\_\_\_

Employer's Address: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Building / Floor Street Region  
\_\_\_\_\_, \_\_\_\_\_  
City Country

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

**Previous Job** (if applicable): ☐ Full time ☐ Part time Starting Date: \_\_\_\_\_

Employer's Address: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Building / Floor Street Region  
\_\_\_\_\_, \_\_\_\_\_  
City Country

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

If currently not working: ☐ Retired, last date of employment: \_\_\_\_\_, Position: \_\_\_\_\_

Indemnity (LBP): \_\_\_\_\_

☐ Unemployed, last date of employment: \_\_\_\_\_, Position: \_\_\_\_\_

Reasons: \_\_\_\_\_

☐ Never worked, provide a document from Social Security Administration (NSSF) for verification.

### Information on Previous Employment

Title / Position	Work address	Period of Work	Income	Indemnity
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## INFORMATION ON MOTHER

Full Legal Name: \_\_\_\_\_ Year of Birth: \_\_\_\_\_

Marital Status: ☐ Married ☐ Separated ☐ Divorced ☐ Widowed

☐ if deceased, year of death: \_\_\_\_\_

**Current Work Status:** ☐ Employed ☐ Self-employed Starting Date: \_\_\_\_\_

Job Title/Position: \_\_\_\_\_

Employer's Address: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Building / Floor Street Region  
\_\_\_\_\_, \_\_\_\_\_  
City Country

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

**Previous Job** (if applicable): ☐ Full time ☐ Part time Starting Date: \_\_\_\_\_

Employer's Address: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Building / Floor Street Region  
\_\_\_\_\_, \_\_\_\_\_  
City Country

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

If currently not working: ☐ Retired, last date of employment: \_\_\_\_\_, Position: \_\_\_\_\_

Indemnity (LBP): \_\_\_\_\_

☐ Unemployed, last date of employment: \_\_\_\_\_, Position: \_\_\_\_\_

Reasons: \_\_\_\_\_

☐ Never worked, provide a document from Social Security Administration (NSSF) for verification.

## Information on Previous Employment

Title / Position	Work address	Period of Work	Income	Indemnity
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**INFORMATION ON APPLICANT**Work Status (if any): ☐ Employed ☐ Self-employed Starting Date: \_\_\_\_\_

Job title/position: \_\_\_\_\_

Employer's address: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Building / Floor Street Region\_\_\_\_\_, \_\_\_\_\_  
Area Country

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

**If married, provide information on spouse and children (if any)**

Spouse Full Legal Name: \_\_\_\_\_ Year of Birth: \_\_\_\_\_

Work Status (if any): ☐ Employed ☐ Self-employed Starting Date: \_\_\_\_\_

Job title/position: \_\_\_\_\_

Employer's address: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Building / Floor Street Region\_\_\_\_\_, \_\_\_\_\_  
City Country

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Number of Children (if any): \_\_\_\_\_

Name	Year of Birth	School Name and Class	Annual tuition fees (L.L.)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

State any source of financial support received for applicant's children

Source of fund	Beneficiary	Amount (L.L.)
_____	_____	_____
_____	_____	_____
_____	_____	_____

## SIBLING INFORMATION

### Siblings at School or University

First Name	Year of Birth	School/University	Annual tuition fees (L.L.)	Financial Aid received (L.L.)
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

### Other Siblings

First Name	Year of Birth	Marital Status	Education, if any	Occupation <small>(include starting date)</small>	Annual Income
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

## FINANCIAL INFORMATION

**Family Annual Income:** the source of Family annual income should be specified even if parents are unemployed or the application will be considered as incomplete.

Sources	Year 19-20 (L.L.)	Year 20-21 (L.L.)
Father's salary	_____	_____
Mother's salary	_____	_____
Siblings	_____	_____
Bonus, educational benefits...	_____	_____
Spouse (if married)	_____	_____
Retirement Salary (if retired)	_____	_____
Others (specify)	_____	_____
Assets	Year 19-20 (L.L.)	Year 20-21 (L.L.)
Cash savings	_____	_____
Rent from property	_____	_____
Other (Specify)	_____	_____

Family Cars	Owner	Make	Model/Year	Year Bought	Estimated Value (L.L.)
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**Expected sources for Financial Aid (other than University of Balamand):** \_\_\_\_\_

**Amount:** \_\_\_\_\_



## FAMILY ANNUAL EXPENSES

	Year 19-20 (L.L.)	Year 20-21 (L.L.)
Rent apartments, homes, including rent for applicant	_____	_____
Food and Clothing	_____	_____
Medical Insurance (if any for family members)	_____	_____
Electricity bills	_____	_____
Water bills	_____	_____
Educational expenses (including the applicants)	_____	_____
Loans	_____	_____
<b>Total:</b>	_____	_____

### Detail on Loans:

Borrowed amount (L.L.)	Date (start-end)	Loan source	Reason	Collateral
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

[illegible]

- ☐ I agree to any house visit / requested.
- ☐ I authorize the financial office to release my transcript of grades to selected f.aid donors if needed.
- ☐ I understand that any unanswered questions or not completed properly may jeopardize the processing of the application.

**The Financial Aid Committee has the right to request other documents, house visits or personal interviews if needed.**

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