

Form FA3
Confidential Statement on
Student Financial Condition



HAIGAZIAN UNIVERSITY
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Name of Reference: _____

Name of Student: _____

This student at our institution has applied for financial aid and has referred to you as a person who has personal knowledge of the family's financial condition.

We kindly request you to complete this form and return it to the student in a **closed and sealed envelope**.

We appreciate the service you are rendering to Haigazian University.

The information will be treated by us as strictly confidential.

1. For how long have you known the applicant and or his/her family? _____

2. How well do you know the family's financial condition? Very well Well Not well

3. Knowing their financial situation appreciably well, would you consider him/her eligible for financial assistance?

4. Is the father gainfully employed? Yes No If yes, annual earnings LBP _____

5. Is the mother gainfully employed? Yes No If yes, annual earnings LBP _____

6. Annual earnings of other members of the family (brothers, sisters, etc.) LBP _____

7. Does the applicant have any personal income? If yes, annual earnings LBP _____

8. Annual family income from other sources (Land, building, pensions, etc.) LBP _____

9. Does the applicant's family own a land(s)? Yes No If yes, where _____

Approximate value LBP _____

10. Does the applicant's family own apartment(s)? Yes No If yes, where _____

Approximate value LBP _____

11. Does the applicant's family own an automobile(s)? Yes No If yes, how many? _____

Use of automobile(s): Private; Business. Value of automobile(s) LBP _____

12. Do you know of any other property of value (shop, building, etc.)? Yes No If yes, explain giving value and income

13. Total number of family members, including applicant: _____

14. Other members of the family currently in pursuit of education: Please furnish their names and institutions attended.

Name of family member	Educational Institution

15. The full tuition of the whole year at Haigazian University is LBP _____

What part of this sum do you think the applicant can pay? _____

16. Additional relevant information which could assist determining the financial need of the applicant (Use a separate sheet, if necessary) _____

Date: _____

Signature: _____