



Financial Assistance Form

The student listed below is planning to participate in a study abroad program with Institute for American Universities. In order to ensure our billing processes are as efficient as possible, we would appreciate your help in understanding if this student will be receiving any financial assistance which will be applied to their IAU program fees.

Please complete this form at your earliest convenience and upload it to your IAU student portal. Should you have any questions, please do not hesitate to contact kristin.ouerfelli@iaufrance.org.

TO BE COMPLETED BY STUDENT

Student Name: _____

I, _____, hereby give my permission to the financial
aid office to provide the following information to IAU.
student signature

Program: IAU

Center (Aix-en-Provence or Barcelona): _____

Country: _____

Term: _____

TO BE COMPLETED BY FINANCIAL AID OFFICE:

Will financial aid (need or gift-based institutional, private, state, or government funds) for this student apply to their program abroad? ____ Yes ____ No

If yes, please list the exact amount: \$ _____

Will this disbursement be made to the student or directly to IAU? _____

Approximate date of disbursement: _____

Name _____ Signature _____

Date _____

Institution _____ Title _____

Telephone _____ Email _____