

Student Financial Disclosure Statement

Name..... _____

Home Address..... _____

Seminary Address.. _____

Program..... _____ Academic Year Accepted... _____

CURRENT FINANCIAL STATUS

What do you own?

	Description	Amount or Value
Savings	Cash and bank accounts	_____
	Other	_____
Property	House, apartment or flat	_____
	Automobile	_____
	Other	_____
	Total:	

Who do you owe?

	Description	Amount or Value
List	_____	_____
	_____	_____
	_____	_____
	_____	_____
	Total:	

Sources Of Income

	Description	Amount or Value
Personal	Savings	_____
	Employment (student or spouse)	_____
	Other	_____
	_____	_____
	Total:	

Financial Assistance

List individuals, churches, or other organization providing financial assistance:

Sponsors	Name	Amount
	_____	_____
	_____	_____
	_____	_____
Total:		

(Students may be asked to have sponsor(s) provide Tyndale with a letter of intent.)

Health Insurance

Do you have Health Insurance? **Yes** **No**

If Yes, name Insuror..... _____
..... _____
..... _____

Remarks..... _____

I certify that the information provided in this statement is true and accurate to the best of my knowledge.

Signed.. _____

Date _____

Place... _____

-Below This Line For Official Use Only-

Date Received..... _____

Action Taken or Comments. _____

Signed..... _____