

**Tuition Remission Application Form  
American University  
Washington College of Law  
LL.M. Program on Law and Government**

*Applicants for Tuition Remission Scholarships are encouraged to attach a cover letter indicating their need for financial aid.*

<b>Date</b> _____	
<b>Seeking assistance for:</b>	<input type="checkbox"/> Fall Semester 200__ <input type="checkbox"/> Spring Semester 200__
<b>Intended enrollment:</b>	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
<b>If part-time, number of course credits:</b> _____	
<b>Amount of financial aid you are seeking:</b> _____ course credits	

<b>Name</b> _____	<b>SSN/AU ID</b> _____		
<b>Current Address</b> _____			
<b>City</b> _____	<b>State</b> _____	<b>Zip Code</b> _____	<b>Country</b> _____
<b>Home Telephone</b> _____		<b>Office Telephone</b> _____	
<b>Fax</b> _____	<b>Email</b> _____	<b>Birthdate</b> _____	

**I. Resources Available to Applicant** (*Please be sure to include ALL resources and assets*)

1. Cash \_\_\_\_\_  
Savings Accounts \_\_\_\_\_  
Checking Accounts \_\_\_\_\_  
Money Market Funds \_\_\_\_\_
2. Stocks \_\_\_\_\_  
Bonds \_\_\_\_\_  
Trust funds \_\_\_\_\_  
Other investments/resources \_\_\_\_\_
3. Non-liquid assets:  
Home \_\_\_\_\_  
Other real estate \_\_\_\_\_  
Other assets \_\_\_\_\_  
\_\_\_\_\_

*Please note that filing an Application for Tuition Remission does not affect an admissions decision.*

4. Will you own or operate a car as an LL.M. student?  Yes  No  
Make/Model \_\_\_\_\_ Year \_\_\_\_\_  
Original Cost \_\_\_\_\_ Amount Owed \_\_\_\_\_ Monthly Payment \_\_\_\_\_

**II. Financial Aid for Upcoming Academic Year**

Please list funding that you have received or that you expect to receive as an LL.M. student.  
*Include any grants, loans, scholarships, or employer contributions.*

Source	Amount	Semester
_____		
_____		
_____		
_____		

**III. Applicant's Expenses for Semester**

1. Tuition, fees & books: \_\_\_\_\_
  2. Housing (rent/mortgage, utilities): \_\_\_\_\_
  3. Food & supplies: \_\_\_\_\_
  4. Undergraduate/J.D. loans: \_\_\_\_\_
  5. Other expenses (e.g., medical, transportation): \_\_\_\_\_
- \_\_\_\_\_

**IV. Employment**

Will you be employed during your course of study?

Yes  No

Employer's Name \_\_\_\_\_

Employer's Address \_\_\_\_\_ Phone \_\_\_\_\_

Position \_\_\_\_\_

Expected hours per week during course of study \_\_\_\_\_

Expected monthly earnings during course of study \_\_\_\_\_

**V. Spouse's Information**

If you are married or will be married during the academic year, please complete this section.

I am married  I am single  I plan to marry this year

Spouse's Name \_\_\_\_\_ Wedding date \_\_\_\_\_

Do you have any dependents?  Yes  No

If yes, how many? \_\_\_\_\_ Ages of dependents \_\_\_\_\_

Will your spouse be employed during your course of study?  Yes  No

Spouse's Employer Name \_\_\_\_\_

Position \_\_\_\_\_ Monthly salary \_\_\_\_\_

Cash, checking, and savings account funds of spouse \_\_\_\_\_

*Please provide copies of your spouse's financial documents as noted in Section VII.*

**VI. Other Relevant Financial Information**

Please include any other information that may be helpful for the financial aid committee in assessing your financial needs for the semester.

**VII. Attachments**

Please include copies of each item listed below **for you and your spouse for the past four months**. Check off to indicate you have done so. Failure to produce the requested documents will result in rejection of the application.

- \_\_\_\_\_ Rent or mortgage receipts
- \_\_\_\_\_ Checking account(s) statements
- \_\_\_\_\_ Savings account(s) statements
- \_\_\_\_\_ Money market account(s) statements
- \_\_\_\_\_ Income/wage statements
- \_\_\_\_\_ Other applicable financial statements (please list below)

**VIII. Certification**

I certify that the facts in this application have been carefully determined and that I have provided an accurate and complete statement of my financial situation. I fully understand that any material omission or misrepresentation is considered a serious violation of the honor code of the Washington College of Law and may result in revocation of a financial award. **I AGREE TO PROVIDE ANY FURTHER FINANCIAL INFORMATION THE PROGRAM MAY REQUEST AND TO NOTIFY THE PROGRAM OF ANY MATERIAL CHANGES TO ANSWERS PROVIDED ON THIS FORM.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse's Signature

\_\_\_\_\_  
Date