

# EINSTEIN FINANCIAL AID QUESTIONNAIRE (CONTINUING STUDENTS)

**2016-2017**

Student Finance Office  
1300 Morris Park Avenue  
Van Etten Building , Room 230  
Bronx, NY 10461  
718.862.1810  
Fax: 718.862.1814  
Email: stufin@einstein.yu.edu

2016-2017 Year in School

MD  MSTP/Ph.D.  Masters  Research

Expected year of graduation \_\_\_\_\_

Please note that you must submit the following forms by the deadlines below to the Student Finance Office (SFO) and make sure to complete your FAFSA application. Our Federal School Code is G09895.

**Check List:**

- Einstein Financial Aid Questionnaire to SFO  
 FAFSA [www.fafsa.ed.gov](http://www.fafsa.ed.gov)

**Complete by:**

**May 2**

**May 2**

PERSONAL INFORMATION: (Please print clearly)

Name: \_\_\_\_\_ Banner ID (no SS#) \_\_\_\_\_  
Last Name First Name Middle Initial

Permanent Address:

(Also used as address for Federal Loans)

Number Street Apartment Number  
City State Country Zip Code  
( ) ( )  
Home Phone Number Work Phone Number

Mailing Address:

(if different)

Number Street Apartment Number

From:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_

City State Country Zip Code

To:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_

( ) ( )  
Home Phone Number Work Phone Number

Primary E-mail Address: \_\_\_\_\_ Secondary E-mail Address: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex:  Male  Female Country of Citizenship: \_\_\_\_\_ If not a US Citizen, Visa Type: \_\_\_\_\_

MARITAL DATA:

Status:  Single  Married  Separated  Divorced Actual/Anticipated Date of Marriage: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of Spouse Or Prospective Spouse: \_\_\_\_\_ In 2016-17, spouse will be:  Student  Employed

No. of Children: \_\_\_\_\_ Name(s) & Age(s) of Child(ren): \_\_\_\_\_

OTHER SOURCES OF FINANCIAL AID

If you expect to receive funding from sources other than Einstein for the 2016-17 academic year, please list below (include government grants, outside scholarships, employer paid tuition benefits, prizes, etc.):

Contribution from parents  
 Loans from parents  
 Spouse's annual income  
 Veteran's Benefits (Amount/Month \$ \_\_\_\_\_)  
 Federal/State Aid to Support a Disability [Source(s) \_\_\_\_\_]  
 Other contributions or receipts:  
 Source: \_\_\_\_\_  
 Source: \_\_\_\_\_  
 Source: \_\_\_\_\_  
 Source: \_\_\_\_\_

2016-2017 Amount per Academic Year	
\$	_____
\$	_____
\$	_____
\$	_____
\$	_____
\$	_____
\$	_____
\$	_____
\$	_____

HOUSING ARRANGEMENTS:

Estimated amount per month as your share of rent, gas, & electricity? \$ \_\_\_\_\_  
 (

Will you be living in home of parent \_\_\_\_\_ or other relative \_\_\_\_\_ during the 2016-17 academic year?  
 Yes/No Yes/No

EINSTEIN FACULTY TUITION REMISSION BENEFITS OR YESHIVA UNIVERSITY STAFF EDUCATIONAL BENEFITS:

If you are the spouse or child of 1.) An Einstein faculty member or 2.) An Einstein/Yeshiva University employee, you may be eligible to receive tuition benefits.

Are you eligible to receive Faculty Tuition Remission benefits from Einstein?  Yes  No

Are you eligible to receive Staff Educational benefits from Einstein/Yeshiva University?  Yes  No

FOR ALL GRANT APPLICANTS:

Has there been any significant change in your financial situation or that of your family in the last year (e.g., a promotion, retirement, illness, loss of work, change in your marital status, birth of a child, spouse changing student or working status)? Will you have significant expenses for these or other reasons?

PLEASE READ AND SIGN THE FOLLOWING STATEMENT:

Federal law requires that Einstein's Office of Student Finance (OSF) obtain a student's voluntary consent in order to participate in electronic transactions for all financial information provided or made available to student loan borrowers, and for all notices and authorizations to Federal Student Aid recipients required under 34 CFR 668.165. This consent will allow OSF to electronically communicate important financial aid information directly to you, which may include notices, disclosures, award letters, and directions to secure websites. Upon request, students are entitled to a paper copy of any of the information electronically communicated by OSF. To request a paper copy, or if you have any questions, please contact OSF via email: [finaid@einstein.yu.edu](mailto:finaid@einstein.yu.edu) or phone: 718.862.1810.

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Type Name Here

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Date

*If for any reason you are unable to sign the certification statement above, please attach a letter of explanation.*