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|  | **Holy Spirit University of Kaslik**  **Financial Aid Office**  **Studies allocation request for members of the same family (siblings)** |  |

*Form to be completed by the students (one form per family) and to be presented for each academic year to the Financial Aid Office before the deadline (see Academic Calendar).*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Academic year**: \_\_\_\_\_\_ / \_\_\_\_\_\_ | | | | | | |
| **Father's first name and last name:**  **Number of siblings studying at the same time at USEK:** | | | | | | |
| **Information about siblings currently studying at USEK** | | | | | | |
|  | **First Name** | **ID** | **Faculty/School** | **Major** | **Level** | **Campus** |
| 1 |  |  |  |  |  | 🞎 KA 🞎 CK 🞎 RM 🞎 ZH |
| 2 |  |  |  |  |  | 🞎 KA 🞎 CK 🞎 RM 🞎 ZH |
| 3 |  |  |  |  |  | 🞎 KA 🞎 CK 🞎 RM 🞎 ZH |
| 4 |  |  |  |  |  | 🞎 KA 🞎 CK 🞎 RM 🞎 ZH |
| 5 |  |  |  |  |  | 🞎 KA 🞎 CK 🞎 RM 🞎 ZH |

**Documents to attach to the form:**

‐ Last transcript for students currently studying

‐ Recent family civil status extract