



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER™
Student Financial Aid

2023-2024 DACA/International Student Financial Need Determination

This form is used in conjunction with the 23-24 Texas Application for State Financial Aid (TASFA) to determine student financial need for DACA and International Students. The need calculation is used by schools when awarding institutional scholarships.

Student Name _____ Student ID# _____

College Major _____ Classification (Jr, Sr, Grad) _____ Expected graduation date _____

Expected Enrollment: Summer 2023 _____ hours Fall 23 _____ hours Spring 24 _____ hours

Are you classified as a TEXAS resident/DACA student? ☐ Yes ☐ No

For more information on TEXAS residency, please visit [http://texreg.sos.state.tx.us/public/readtac\\$ext.TacPage?sl=T&app=9&p_dir=N&p_rloc=181014&p_tloc=&p_ploc=1&pg=4&p_tac=&ti=19&pt=1&ch=21&rl=21](http://texreg.sos.state.tx.us/public/readtac$ext.TacPage?sl=T&app=9&p_dir=N&p_rloc=181014&p_tloc=&p_ploc=1&pg=4&p_tac=&ti=19&pt=1&ch=21&rl=21)

If no, please indicate: Applicant's Citizenship _____ Country _____ Visa Type _____

Household Information

List yourself and those living in your household that you will provide more than half of their support during the 2023-2024 school year. Indicate if the individual will be attending college at least halftime for the 2023-2024 school year. (attach additional sheet if necessary)

Name and Age	Relationship	Attending College, if so please list college

Student Budget & Assets. Round to nearest dollar. Do not leave any blanks. Enter -0- or N/A.

*If you have work income, attach a signed copy of your 2021 federal tax return (if filed) and 2021 W-2 form(s) or other earning statement(s).

2023 Student Income Resources	Amount (indicate monthly or annually)	Source (ex. work, parents, etc.)
Income from work		
Personal Funds (Cash, Savings, Etc.)		
Private Loans		
Stipends		
Financial Aid/Scholarships/Tuition and Fee Waivers		
Other Income (gifts, family support, etc.)		
Total Resources		

Step 4: Certification Statement

I certify that the information on this form is true and complete to the best of my knowledge. If requested, I agree to provide further documentation to substantiate the information provided. I understand that false statements or misrepresentations will be cause for denial, reduction, or repayment of financial aid funds received. I understand that all applications are reviewed and may not result in a financial aid offer.

Student Signature _____ Date _____
(no typed signatures)