

## **Scripps College International Student Financial Form**

Date of Birth (dd-mm-yyyy)		Common App ID or QuestBridge ID (Only submit this form after you have applied for Admission)	
		Country of Citizenship	
Section I: Funding			
Please indicate the amount of su	upport that you and your parents anticipat of attendance for the 2022-2023 academic ch year.		
	2023-2024 Cost of Atte	endance	
	Tuition: Room: Board: Student Body Fee: Books, Supplies, Personal Expenses Student Health Insurance: Total:	\$63,216 USD \$11,390 USD \$9,940 USD \$218 USD \$2,300 USD \$2,996 USD <b>\$90,060 USD</b>	
Student:		Parent:	
Year 1: \$	USD	Year 1: \$	USD
Year 2: \$		Year 2: \$	USD
Year 3: \$		Year 3: \$	USD
Year 4: \$		Year 4: \$	USD
Section II: Sponsor Funding		Section III: Outside Scholarships	
Please indicate the amount of support that you expect to receive from a sponsor, as well as the source (government, company, friends or relatives, etc.)		Please indicate the amount of scholarships that you expect to receive from all organizations outside of Scripps College, as well as the source(s) of the scholarships:	
Year 1: \$	USD	Year 1: \$	USD
Year 2: \$	USD	Year 2: \$	USD
Year 3: \$	USD	Year 3: \$	USD
Year 4: \$	USD	Year 4: \$	USD
Source(s):		Source(s):	



Section IV: Additi	ional Information			
Do you have a source	e of emergency funds once you arrive	in the U.S.?	□NO	
	If YES, name source:			
What is the total amo	ount of money you expect to have who	en you arrive at this inst	itution? \$	USD
What is the current ex	xchange rate between your country's	currency and the USD?	\$1 USD =	
How will you pay for y	your transportation to the U.S.?			
Sign	(Electronic Signature OK)		Date	

Please upload this completed form to your Scripps College applicant status portal. DO NOT upload any materials other than this form and any supporting documents (such as bank statements). All other items must be sent to <a href="mailto:applicants@scrippscollege.edu">applicants@scrippscollege.edu</a>.