



GRADUATE STUDIES
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Department Financial Support Form
 GS Form I-1

Applicant Information

Family or Surname _____ First Name _____ Middle Name _____ BYU Net ID _____

E-mail Address _____ BYU ID Number _____ Male Female

Graduate Program and Degree _____ Semester/term and year for which you are applying _____ Birth Date (MM/DD/YYYY) _____

Department Contribution
 (To Be Completed by Department)

In the boxes below please indicate the amount of support (in dollars) that you will be providing to the international student during their studies. Please indicate in the total all scholarships, expected wages from assistantships/teaching or research positions, and any other expected support the student will receive from your department.

BYU Department Financial Support	List all amounts in US \$ equivalent		
	First Year	Second Year	Third Year
Teaching or Research Assistantship			
Scholarship			
Other			

Printed Name of Graduate Coordinator or Department Chair _____ Original Signature of Graduate Coordinator or Depart- _____ Date _____

Please return the completed form to Graduate Studies, 105 FPH, Provo, UT 84602.

Notes (for office use only):

Office Use Only: Date Input