



Application for Financial Aid

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Do not staple.

PMU ID No.: _____

Biographical Information

Full Legal Name: Mr. /Ms. _____ / _____ / _____
Last First Middle (or father's name)

PMU Box #, if any: _____ Gender: Male Female

Marital Status: Single Married Others _____
(specify)

Date of Birth: ____/____/____ Place of Birth: _____
Day Month Year

Civil ID # _____ Place/Date of Issue: _____

Nationality: Saudi Other _____
(Specify)

Applicant's Residence:

on Campus with Parent's rented Apartment

Private Shared others (specify) _____

Address: _____ / _____ / _____
Area Street Bldg.

_____ / _____ / _____
P.O. Box/Zip Code City Country

_____ / _____ / _____
Home Phone Cell Phone E-mail

Academic Information

Secondary School/Transfer from other University, Class and Major at time of application:

High School	Years attended (From-To)	Financial Aid received (if any)	Class Completed
University	Years attended (From-To)	Financial Aid received (if any)	Degree Earned

Faculty (PMU): _____

Major (PMU): _____



Information on Father/Guardian

Full name: _____

Year of Birth: _____

Married Separated Divorced if deceased, year of Date: _____

Current Work Status:

Employed Self-employed

Job Title/Position: _____

Institution/Employer's Name: _____

Employer's Address: _____ / _____ / _____
Area Street Bldg.

_____ / _____ / _____
P.O. Box/Zip Code City Country Work Phone #

If Currently Not Working:

Stopped Working since: _____

Unemployed State reason(s) _____
(Support your statement with documents if any)

Retired Indemnity received (in SAR), if any: _____
(Include retirement documents if any)

Date received: _____

Information on Previous Employment:

(Support the Information with documents)

Title/Position	Place of Work	Period of Work	Previous Annual Income in SAR	Indemnity Received (if any) in SAR



Information on Mother (Optional)

Full name: _____

Year of Birth: _____

Married Separated Divorced if deceased, year of Date: _____

Current Work Status:

Employed Self-employed Starting Date of Current Employment: _____

Job Title/Position: _____

Institution/Employer's Name: _____

Employer's Address: _____ / _____ / _____
Area Street Bldg.

_____ / _____ / _____
P.O. Box/Zip Code City Country Work Phone #

If Currently Not Working:

Stopped Working since: _____

Unemployed State reason(s) _____
(Support your statement with documents if any)

Retired Indemnity received (in SAR), if any: _____
(Include retirement documents if any)

Date received: _____

Never Worked
(Provide a document from the Social Security Administration for verification)

Information on Previous Employment:

(Support the Information with documents)

Title/Position	Place of Work	Period of Work	Previous Annual Income in SAR	Indemnity Received (if any) in SAR



Information on Applicant's Work (if any)

Employed Self-employed Period of work: _____

Job Title: _____ Institution/Employer's Name: _____

Institution/Employer's Address: _____

_____/_____/_____ Telephone

E-mail: _____

Information on Applicant's Spouse (if Married)

Spouse's Full Name: _____ Date of Birth: __/__/__ No. of Children: _____
(Optional) (Day Month Year)

Institution/Employer's Name: _____

Employer's Address: _____/_____/_____
Area Street Bldg.

_____/_____/_____/_____
P.O. Box/Zip Code City Country Work Phone #

Information on Applicant's Children (if any)

Name	Year of Birth	School	Class	Annual Tuition Fees (SAR)

State any Financial Support you receive for your Children

Source of Fund	Beneficiary	Amount (SAR)



Siblings Information (at School/University)

First Name	Birth Year	Education/Class (current year)	Name of School/University	Annual Tuition Fees (SAR)	Financial Aid Received: amount (SAR)/source

Dependents include only dependents living with the family other than the nucleus family members.

Full Name	Birth Year	Relation to Applicant	Describe Current Status and Future Plans (if any)

If there are any special family circumstances that will describe your situation more accurately, please explain in the space below and submit supporting documents.



What Type of Aid are you applying for?

Scholarship Loan Others _____

1. Please note any extracurricular and/or extra-professional activities in order of their importance to you.

Activity	Number of Years	Office Held (if any)

2. Describe yourself as a person, stressing your strengths and weaknesses.

3. Describe your vocational or professional ambitions. Give the reasons for your interest in them, stating why you ultimately chose to make this application.



I certify that the answers to the foregoing questions and the statements on the previous pages were completed by me and are, to the best of my knowledge, true, and complete.

(I understand that any misrepresentations or material omission made on this form may invalidate this application and cancel any aid awarded to me at any time). I also authorize investigation of all statements contained herein.

I agree.

I authorize the Office of Financial Aid to release my transcript of grades to selected Financial Aid Donors, if need arises.

Any missing or false information in the application will jeopardize the applicant's financial aid status.

The application will also be considered incomplete if the applicant and/or parents refuse to provide any document requested by the Office of Financial Aid.

Signature of Parent or Guardian

Date

Signature of Students

Date



Date of Application: _____ / _____ / _____
Day Month Year

DOCUMENTS REQUIRED (Checklist)

- 1. High School Transcript of Grades.
(Current PMU students applying for financial aid for the first time can submit only PMU transcript of grades)
- 2. Employment Records. (optional)
Recent Employment Certificate(s) for job(s) held by each earning member of the family clearly stating occupation, job title, years of service, and benefits (e.g. educational benefits, accommodation, etc.).
- 3. Recent certificate showing annual tuition fees and receipt of fees for each dependent child enrolled at school or university.
- 4. Family Civil Status Record (issues within the previous 3 months)
- 5. Any additional document that would support the application for financial aid (e.g. medical reports and recent medical/hospital bills, certificate of job termination or end of service, etc...)
- 6. PMU acceptance notice including ID number.