



2024-25 CALTECH SUPPLEMENTAL AID APPLICATION

Student Information

Last Name	First Name	MI	
E-mail Address		UID (Current students only)	
Permanent Address (Include a	pt. no.)		
City	State	Zip Code	
Phone Number (Include area c	ode)	Date of Birth	
What is the current marital stat	us of your parents?		
Married	Remarried		
Single (never married)	Unmarried and both parents liv	Unmarried and both parents living together	
Separated	Divorced	Widowed	
•	ital status is divorced, separated or single using only information from the custodial pare	,	
Expected graduation from Calt	ech: Month Yea	r	
Please select your housing pla	ns for academic year 2024-25:		
Caltech-owned housing	Non-Caltech-owned housing	Living with Parents/Relative	

Page 2 of 4 Image Code: C015

Parent(s)' Additional Expenses

Medical/Dental Expenses paid that were not covered by insurance or reimbursed

Year	2022	2023
Amount		

Include unreimbursed insurance premiums. **Don't include** expenses reimbursed by Health Savings Accounts (HSA) or Health Flexible Spending Arrangements (FSA), or any expenses reimbursed with pre-tax dollars. Please explain the circumstances surrounding these expenses on page 4 of this form.

Child support your parent(s) paid because of divorce, separation or legal requirement

Year	2022	2023
Amount		

Name of Person Receiving Support

Page 3 of 4 Image Code: C015

Parent(s)' Assets

List asset values as of the date that this form is completed.

Other Real Estate Value

Do not include parents' primary residence

Other Real Estate Debt

Do not include parents' primary residence

Investment Value

Include money market funds, mutual funds, certificates of deposit, stocks, stock options, bonds, other securities, commodities, installment and land sale contracts. (Do not include the value of retirement accounts such as 401(k) or 403(b))

Coverdell Savings Account

Enter the combined value for all children

Section 529 College Savings or Pre-Paid Tuition Plans Enter the combined value for all children

Cash, Savings and Checking

Application Signature (Print, sign, scan and upload to IDOC)

By signing this application, we certify that all the information reported to qualify for federal student aid is complete and correct. **At least one parent must sign**.

Student Signature	
Parent Signature	Parent Name

Parent E-mail

WARNING: IF YOU PURPOSELY GIVE FALSE OR MISLEADING INFORMATION ON THIS FORM, YOU MAY BE FINED AND/OR SENTENCED TO JAIL; YOU MAY ALSO LOSE YOUR ELIGIBILITY FOR FINANCIAL ASSISTANCE FROM CALTECH.

Page 4 of 4 Image Code: C015

Explanations/Special Circumstances

Use the space below to explain any unusual expenses or special circumstances you would like us to consider when determining your eligibility for financial aid. Attach additional sheets and/or documentation as needed.