



Admissions Office
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Goshen College Financial Affordability Form

The Goshen College Financial Affordability Form is designed to gather information from students who are applying for need-based financial aid at Goshen College who can otherwise not complete the Federal Application for Financial Student Aid (FAFSA). This would include international, Canadian and undocumented students. Students must complete the financial ability form and supply an official or certified copy of a bank statement for a checking or savings account (liquid assets), or an official, certified copy of a letter from the bank holding the checking or savings account. Email a copy of your signed form to admissions@goshen.edu. You are advised to keep copies of the financial documents you have submitted for the United States Consular Office when you apply for your visa.

All sections on this form must be completed. (Please write in ink or type.)

Applicant name: _____
Last name / Surname as shown on passport First name / Given name as shown on passport Middle name as shown on passport

Email address: _____

Permanent overseas address (for international students only): Per government regulations please list an address outside the United States

Country of birth: _____ **City of birth:** _____

Country of citizenship: _____ **Date of birth (month / day / year):** _____

Gender: ☐ Woman ☐ Man ☐ Agender ☐ Another gender (please specify): _____

Please enter the expected amount of annual support toward your educational cost from the sources listed below. For years 2-4 include a projected increase of 3% each year.

Funding source	Year 1 (Documented)	Year 2 (Projected)	Year 3 (Projected)	Year 4 (Projected)
Personal savings (student)				
Sponsor(s)*				
Total				

*A sponsor is considered to be a family member, corporation or government agency contributing funds for the student's academic program and expenses.

Estimated student's average cost for the 2025-26 academic year. Actual cost will vary based on potential Goshen College scholarships that are awarded.

Tuition and fees:	\$40,060
Room (housing & meals):	\$12,240
Total:	\$52,300

I/We certify that the information given on this form is complete and accurate to the best of my knowledge. I am fully aware that any false or misleading statement may result in denial of admission or cancellation of registration following enrollment. I/We pledge financial support to meet the education and living expenses of this student in the annual amounts cited above.

Sponsor name: _____ **Sponsor relationship to student:** _____
Example: Mother, Self, Government Agency

Sponsor signature: _____ **Date (month / day / year):** _____

Applicant (student) signature: _____ **Date (month / day / year):** _____