



**I am interested in receiving Financial Aid Application materials from  
The International School of Minnesota's Financial Aid Office**

**Please send the information to:**

**Name** (please print): \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Date of Inquiry:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_

**Grade(s) Student(s) Entering:** \_\_\_\_\_ **Academic Year:** \_\_\_\_\_

Student(s) currently attending ISM? Yes  No

If not currently attending ISM, has the student applied for admission? Yes  No

(Application for admission includes receipt of student grade reports and completion of ISM admissions testing requirements)

FA Form Feb 2016

**RETURN THIS FORM TO ISM ADMISSION OFFICE**

For Office Use:

Date inquiry received by FA Office: \_\_\_\_\_

Date FA packet sent: \_\_\_\_\_

Sent by: \_\_\_\_\_