



<i>For Office Use Only</i>
<input type="checkbox"/> <i>Approved</i>
<input type="checkbox"/> <i>Not Approved</i>

OLIVER CHAPMAN FUND APPLICATION

The Oliver Chapman Fund was founded to honor the memory of Oliver, an undergraduate student from Panama who attended Tufts from 1988-1992. The Chapman Fund is available to all international undergraduate students on financial aid.

****PLEASE NOTE:** This form must be completed ***before*** your funding request can be considered. The completed form should be emailed to chapman@tufts.edu.

Name: _____ Date: _____

Non-Tufts Email Address: _____

Major: _____ Expected Graduation Date: _____

Have you previously applied for funding from the Chapman Fund?

No

Yes – Please indicate when and for what purpose: _____

Please be aware that due to the fund's limitations, we can generally only grant a student funding on a one-time basis except in extenuating circumstances.

Funding Amount Requested: \$ _____

Purpose for Funding (please select one):

Medical/Dental Costs not covered by Tufts Health Insurance

Clothing for new climate

Textbooks, laptop, or other school-related costs

Funding a summer class, research or internship:

___ Housing/Rent

___ Tuition

___ Travel

___ Other: _____

Unexpected financial circumstances: _____

Other: _____

FUNDING REQUEST DETAILS

Please provide a detailed explanation regarding your specific need, and how this request will benefit your academic goals or living experience at Tufts.

Please provide an estimated budget and detailed description of what the funds will be used for. Please also include additional supporting documents (such as bills, receipts, etc), if applicable.

Are you receiving funds from any other department towards this request? Please provide information on the amount of funds you are receiving.

Are you currently working on campus or on CPT? If yes, please indicate your hours/salary. If no, please indicate the reason.

NONRESIDENT ALIEN PAYMENT INFORMATION FORM

This form is used to determine an individuals tax liability (if any).

Name First Middle Last

Email Student ID, Required if Applicable

Part A Location where services are performed Within the U.S. Outside the U.S. Please indicate Country

Part B Classification Nonresident Alien, U.S. VISA number VISA type Country issuing passport Purpose of payment

Part C B-1/B-2 Attestation This section only needs to be completed if you are in the U.S. on a B-1 or B-2 Visa. Number of days at Tufts University

Part D Tax Analysis Based on the information you provided, Tufts University may request additional information from you and will use this information to perform a tax analysis for you.

Part E Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. Signature Date

Payments to Nonresident Aliens for services performed within the U.S. are subject to a 30% withholding tax. The income and taxes withheld will be reported on IRS form 1042S.

This form along with a W8-Ben should be attached to The payment request form (eReq, Check Voucher...)