AMERICAN UNIVERSITY OF BEIRUT

Office of Financial Aid
مكتب المساعدات المالية

SCHOOL/UNIVERSITY APPLICANT FINANCIAL AID DISCLAIMER

Full Name: _____

AUB ID Number: _____

SLATE ID Number: _____

I certify that I was not receiving financial aid while enrolled in school or university. I understand that any false statement, false information, or misrepresentation in this application or any supporting document(s) may lead to immediate loss of my financial aid and may subject me to disciplinary action.

_____ _____

Signature Date (MM/DD/YYYY)

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