TRINITY WESTERN UNIVERSITY

FINANCIAL NEED ASSESSMENT

SPRING 2026 SEMESTER

This application is for new incoming Canadian students who are beginning their studies in January for the Spring 2026 semester. This form is used to determine eligibility for need-based funding for the spring semester only.

Please submit the need assessment to the Financial Aid Office at awards@twu.ca by **December 1** to allow sufficient time for processing.

Note: The Financial Aid & Awards application for the 2026-27 academic year, for studies beginning September 2026 will be available at twu.ca/awards on January 15, 2026.

CONTACT US
Financial Aid Office
Mattson Centre
(604) 513-2019
awards@twu.ca
twu.ca/awards

Optional: You may provide any additional information that you believe is relevant to your financial aid application or your current circumstances in the text box below.

TRINITY WESTERN UNIVERSITY

FINANCIAL NEED ASSESSMENT

SPRING 2026 SEMESTER

SECTION 1: PERSONAL INFORMATION

Applicant's Name: _____ TWU Student ID:_____

Program of Study: _____ Undergraduate ☐ Graduate/ACTS ☐

SECTION 2: FINANCIAL INFORMATION

Pre-Study Income (September - December)

Employment Income (total amount) $_____

Total savings by December $_____

Study Period Income (January - April)

Employment Income $_____

Estimated contribution from family $_____

Non-TWU Scholarships $_____

Sponsorships $_____

Other Funding or Income $_____

Total $_____

Assets:

What is the net worth of your investments? $_____

Type of Investment: _____

Date Purchased: _____

Total $_____

Do you own/lease a car/truck/motorcycle? Y ◯ N ◉

Year:_____ Make: _____ Model:_____

Estimated Resale Value: $_____

QUESTIONS? Contact the Financial Aid Office at 604-513-2031 or at awards@twu.ca

SECTION 3: RESIDENCE INFORMATION

During your pre-study period (September - December) will you be living in a home owned/rented/leased by your parent(s)? Y ◉ N ○

During your study period (January – April) will you be living in a home owned/rented/leased by your parent(s)? Y ◉ N ○

SECTION 4: DEPENDENCY STATUS

What is your Martial Status? Single ◉ Single Parent ○ Married* ○

** If married, please have your spouse fill out the Spousal Income Form (Section 5 on the next page)*

Will you be age 22 or older as of December 1, 2025? Y ○ N ◉

Have you spent two or more years in the full-time labour force? Y ○ N ◉

Are you or were you, at the time of your 19th birthday, a youth in continuing care or custody of a director of child welfare? Y ○ N ◉

If you answered NO to all of these questions, your parents must complete the parental portion (see last page) in order to complete the application process.

My parent(s) are required to fill out the parental portion Y ◉ N ○

If your marital status is single parent: total the number of people in your family including you and *eligible dependents _____

**Eligible dependents are any dependents for whom you receive the Canada child tax benefit or whom you claimed a benefit on your most recent tax return and/or children age 22 as of December 1, 2025 who are full-time students.*

As witnessed by recognition here, I certify that all information given in this portion application is complete and true in every respect and all dollar figures are in Canadian currency.

Student Signature _____ Date _____

PLEASE RETURN TO:

Trinity Western University Financial Aid Office

Email: Awards@twu.ca

Financial Aid Office Use Only

Processed by: _____ Date:_____

QUESTIONS? Contact the Financial Aid Office at 604-513-2031 or at awards@twu.ca

SECTION 5: SPOUSAL PORTION (Married Students Only)

Spousal Income Form:

Enter your total gross income from your last Income Tax Return	$_____
Income Tax paid for last tax year	$_____
Total CPP Contributions	$_____
Total EI Contributions	$_____
Other Deductions	$_____

If other, please describe: _____

Employer Name _____

Number of people in immediate family (including yourself, spouse, and eligible dependents*) _____

Number of dependents that are currently in post-secondary (include spouse) _____

**Eligible dependents are any dependents for whom you receive the Canada child tax benefit or whom you claimed a benefit on your most recent tax return and/or children age 22 as of December 1, 2025 who are full-time students.*

SPOUSE CERTIFICATION

As witnessed by recognition here, I certify that all information given in this portion application is complete and true in every respect and all dollar figures are in Canadian currency.

_____ _____

Spouse Signature Date

_____

Spouse Name (PLEASE PRINT)

PLEASE RETURN TO:

Trinity Western University Financial Aid Office

Email: Awards@twu.ca

Financial Aid Office Use Only

Processed by: _____ Date:_____

QUESTIONS? Contact the Financial Aid Office at 604-513-2031 or at awards@twu.ca

SECTION 5: PARENT PORTION

Student's Name: _____ TWU Student ID #:_____

Parent #1

Enter your total gross income from your last Income Tax Return $_____

Total Income Tax paid for last tax year $_____

Total CPP Contributions $_____

Total EI Contribution $_____

Other Deductions $_____

If other, please describe:

_____

Employer Name _____

Parent #2

Enter your total gross income from your last Income Tax Return $_____

Total Income Tax paid for last tax year $_____

Total CPP Contributions $_____

Total EI Contribution $_____

Other Deductions $_____

If other, please describe:

_____

Employer Name _____

Number of people in immediate family (yourself, spouse, and dependents*) _____

Number of dependents who are currently studying full-time at a post-secondary institution _____

**Eligible dependents are any dependents for whom you receive the Canada child tax benefit or whom you claimed a benefit on your most recent tax return and/or children age 22 as of December 1, 2025 who are full-time students.*

PARENT CERTIFICATION

As witness by our recognition here, I/we certify that all information in this application is complete and true in every respect and all dollar figures are in Canadian currency.

_____

Parent Signature

_____

Print Name

_____

Date

All information provided on this form will be treated with the highest level of confidentiality. Information will be used in the determination of student financial need for purpose of TWU awards. Your information will not be shared with any other parties within or outside of Trinity Western University

PLEASE RETURN TO:

Trinity Western University Financial Aid Office

Email: Awards@twu.ca

Financial Aid Office Use Only

Processed by: _____ Date:_____

QUESTIONS? Contact the Financial Aid Office at 604-513-2031 or at awards@twu.ca