

Tysons Campus 8620 Westwood Center Dr. Vienna, VA 22182 TEL. 703-206-0508

## REFUGEE/ASYLEE STATEMENT

## **Student Information** Student name: Approval Date of Refugee/Asylee Telephone Number: Name of Program: Program Start Date: Campus: I have been forced to leave my country in order to escape war, persecution, or natural disaster. So, I cannot submit Wage and Tax statement for each source of employment income for 2021. Student Signature: \_\_\_\_\_ Date: \_\_\_\_ Received by: Signature of Admission Department: \_\_\_\_\_\_ Date: \_\_\_\_\_ Signature of Financial Aid Department: \_\_\_\_\_\_ Date: \_\_\_\_\_ Signature of Academic Dean: \_\_\_\_ Date:

Copies to: Financial Aid