



AMERICAN UNIVERSITY OF IRAQ
SULAIMANI

Form A
Self-Employed Income Statement

FORM A must be completed for each self-employed member of the household. Please submit the form with Income and tax Statement, business registration document, rental contract, and the business bank statement of account for the last three years. Answer all questions carefully and completely. Any missing information will delay or deny processing the Application for Financial Aid. Photocopy this form as needed.

Name of Student: _____

Name of self-employed family member: _____

Relationship to Student: _____

Name of institution/business, if applicable: _____

Registration number: _____ Date: _____

Sole Owner Partner Number of Partners: _____ Share: _____ %
 Freelance Other Specify _____

Nature of business, in detail:

Work Address: _____

City: _____ Country: _____

Telephone: _____ Mobile Phone: _____

Email Address: _____ @ _____

Number of employees/workers: _____

Annual net income: (The net income is the total personal income of the self-employed family member and partners, if any, after deduction of all institution's expenses)

US\$

Employer Name: _____ Signature and Seal: _____ Date _____

I certify the accuracy of this information.

Signature: _____ Date: _____