2023-2024 International Business Supplement – Prospective Students

WILLIAMS COLLEGE 995 Main St. Third Floor OFFICE OF FINANCIAL AID Williamstown, MA 01267

413-597-4181 phone 413-597-2999 fax

The completed form should be submitted via your My Williams Account financial aid checklist

Student's Name:	Williams ID:
The following questions will collect additional information. Please use 2021 information and enter operates. Indicate that currency:	ation about the business listed on your Financial Aid the amounts in the currency in which the business
Date Business Commenced:	
 Name(s) of Parent(s) involved in this busines 	s:
 Percentage of Business Owned by Parents: 	
 Number of Employees: Of this number, how may are family members 	s?
 Name of Business: Type of Business: Describe Product or Service: 	
Please report values that reflect only parent(s)	share of ownership in the business:
Gross Business Revenues (annual, 2021)	
 Business Expenses: (Itemize. Attach a separate sheet if necessa 	ry)
Paid to parent(s)- if none, please explain	
Total Expenses:	
 Net Profit (Revenue less Expenses): 	
Business Assets:	
Cash:	
Other Current Assets:	
Land and Buildings (present market value	e):
Equipment/Fixed Assets (fair market valu	e):
Total Business Assets::	Total Business Debt:
I declare that the information on this form is true, cordocumentation to verify information reported.	rect, and complete. If requested, I agree to provide
If a Business tax return is filed, please submit a trecent business tax return.	ranslated copy of all pages and schedules of the most
Father/Stepfather's Signature:	Date:
Mother/Stepmother's Signature:	Date: