

Please contact our office if you need assistance completing this form.

**Suffolk University**

• Office of Student Financial Services • 73 Tremont Street • Boston, MA 02108  
617-573-8470 • 617-720-3579 (fax)

**2025 – 2026**

**\$1000 Family Discount Application**

The Family Discount Plan was established to assist families with more than one undergraduate student enrolled at Suffolk University. ***Both family members must be full-time undergraduate students enrolled in the Sawyer Business School (SBS) or College of Arts (CAS).*** If eligible, each family member will receive a \$500 discount on their tuition. Please note this plan is only available to immediate family members. Applicants for this program may be required to provide verification information (i.e. tax returns, birth certificates, etc.).

**Applicant Section: (First student to enroll at Suffolk)**

Name: \_\_\_\_\_ Date of initial enrollment: \_\_\_\_\_  
UID #: \_\_\_\_\_

Number of credits enrolled for: Enrolled in: (check one)  
Fall 2025 \_\_\_\_\_ Spring 2026 \_\_\_\_\_ SBS \_\_\_\_\_ CAS \_\_\_\_\_

Are you currently receiving other financial aid? \_\_\_\_\_

**Family member Section: (Second student to enroll at Suffolk)**

Second student's relationship to applicant: (pick one) Spouse / Sibling / Parent

Name: \_\_\_\_\_ Date of initial enrollment: \_\_\_\_\_  
UID #: \_\_\_\_\_

Number of credits enrolled for: Enrolled in: (check one)  
Fall 2025 \_\_\_\_\_ Spring 2026 \_\_\_\_\_ SBS \_\_\_\_\_ CAS \_\_\_\_\_

Are they currently receiving other financial aid? \_\_\_\_\_

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

A "wet signature" is required, electronic signature will not be accepted.