



**INSTRUCTION**

- If you are using assistive technology and need assistance filling out this form, please contact the Financial Aid Office at (508) 626-4534.
- Digital signatures are not accepted. Email is not a secure method for submitting documents. Please submit this form with relevant documentation via fax (508) 626-4598, mail, or in person to Financial Aid Office.
- This form will not be processed if any items are left blank or illegible. Please print clearly and answer all applicable questions. If clarification of your situation is necessary, additional information or documentation may be required.

**SECTION 1: STUDENT INFORMATION**

Last Name:	First:	M.I.:	FSU ID#
Student's Street Address (include apt. #):			
Phone Number:	Email Address:		

**SECTION 2: YOUR PARENTS' HOUSEHOLD INFORMATION**

1. **Your custodial parents' current marital status:** Please circle the appropriate status.

Single      Married      Divorced      Separated      Widowed

Unmarried and both legal parents live together

2. **Household Information:** If additional space is needed to list the full household, attach a separate page.

- Line 1: List yourself, even if you do not live with your parent(s).
- Lines 2-3: List parent 1 (**The parent you have lived with most in the last 12 months.**) and parent 2/stepparent.
- Lines 4-7: List your parent's/stepparent's other children **if your parent(s)/stepparent will provide more than half of the children's support from July 1, 2020, through June 30, 2021**, or if the other children would be required to provide parent/stepparent information if they were completing a FAFSA for 2020-2021. Include children who meet either of these standards, even if a child does not live with the parent(s)/stepparent.
- List other people **if they now live with your parent(s)/stepparent and your parent(s)/stepparent provide more than half of the other person's support, and will continue to provide more than half of that person's support through June 30, 2021.**

1.	2.	3.	4.	5.	6.	7.
<u>Full Name</u> of each household member	<u>Age</u>	<u>Relationship</u> of each household member to the student	If you have a sibling planning to be enrolled at least half time for 2020-2021, provide the <u>Name of the College</u> they will be attending			
		Self	Framingham State University			
		Parent 1	Not Applicable			
		Parent 2 / Stepparent	Not Applicable			

**SECTION 3: STUDENT AND PARENT 2018 INCOME INFORMATION**

1. Did you file a 2018 Federal Income Tax Return? Please circle the appropriate status.

**Student:**                Yes\*                                No\*\*

**Parent(s):**            Yes\*                                No\*\*

**\* If you or your parent(s) answer Yes to above question you must submit one of the following:**

- IRS Data Retrieval is the preferred method (DRT electronically transfers your 2018 IRS tax information to your FAFSA).
- The student/parent is unable to use the IRS DRT and instead will provide a 2018 IRS Tax Return Transcript or a signed copy of the 2018 IRS Tax Return **and all schedules** filed with the IRS. Tax transcripts can be ordered online at <https://www.irs.gov>.

**\*\*If you or your parent(s) answer No to above question you must complete SECTION 4 of this form.**

**SECTION 4: IF YOU OR YOUR PARENT DID NOT FILE AND WERE NOT REQUIRED TO FILE A 2018 FEDERAL INCOME TAX RETURN COMPLETE THIS SECTION.**

**PLEASE NOTE:** If information listed in SECTION 4 indicates you were required to file a 2018 Federal Tax Return; you must do so before a financial aid award can be determined and/or disbursed. Please answer all questions completely.

1. Were you employed and did you earn income in 2018?

**Student:**                Yes                                No

**Parent(s)\*:**            Yes                                No

2. If you were employed and/or earned income from work in 2018, please list the names of all employers and the amounts earned from each employer in 2018. **A copy of all 2018 W-2 forms must be submitted with this form.**

Student Employer's Name	Amount Earned	Parents Employer's Name	Amount Earned
1.	\$	1.	\$
2.	\$	2.	\$
3.	\$	3.	\$

**\*Parent(s)** - if you did not file a 2018 Federal Tax Return, you must request a Verification of Non-Filing Letter from the IRS by using FORM 4506-T and checking BOX 7. The Verification of Non-Filing Letter and FORM 4506-T can be ordered/printed online at <https://www.irs.gov>.

**PLEASE COMPLETE SECTIONS 5 AND 6 BELOW**

**SECTION 5: OTHER INCOME RECEIVED IN 2018**

**1. Other Income Received:**

**Please answer all questions and enter "0" if not applicable.**

	<b>Student</b>	<b>Parent(s)</b>
Alimony or spousal support received in 2018 and not reported on tax return:	\$	\$
Money received or paid on your behalf (e.g., bills, rent, tuition) by a third party (e.g., relatives, friends):	\$	\$
Payments to tax-deferred pension and retirement savings plan (paid directly or withheld from earnings), including, but not limited to, amounts reported on W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H, and S. Do not include amount reported in code DD (employer contribution towards employee health benefits.)	\$	\$
Military, clergy, or other housing, food, or living allowance payment received (including cash payments and cash value benefits):	\$	\$
Amount of Veterans Non-Education benefits, (such as disability, death pension, or Dependency & Indemnity Compensation (DIC), and/or VA educational work-study allowances):	\$	\$
Other untaxed income (e.g. workers' compensation, disability, etc.):	\$	\$
<b><u>List Source:</u></b>	\$	\$
<b><u>List Source:</u></b>	\$	\$

**2. Child Support Received by Parent in 2018:** If additional space is needed to list all children, attach a separate page.

<b>Name of Person Who Received Child Support</b>	<b>Name of Child for Whom Support Was Received</b>	<b>Name of Person Who Paid the Child Support</b>	<b>Total Amount of Child Support Received in 2018</b>
<i>(example)</i> Marty Smith	Chris Jones	Terry Jones	\$6,000.00
1.			
2.			
3.			
4.			
5.			
6.			

**3. Benefits Received:** If anyone in your household received benefits from the following programs in 2018, circle each program that applies.

Medicaid or Supplemental Security Income (SSI)

Free or Reduced-Price School Lunch

Supplemental Nutrition Assistance Program (SNAP)

Social Security Benefits

Temporary Assistance for Needy Families (TANF)

Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

### **NOTICE:**

**Any financial aid awarded prior to verification is estimated. The Financial Aid Office has the right, after reviewing your verification information, to change or cancel your award. Changes in funding, changes in application information, enrollment status, or reclassification of residency will affect your financial aid eligibility and may result in a revised financial aid award.**

### **SECTION 6: CERTIFICATION**

**WARNING:** If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both. Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent must sign and date.

Student Signature:

Date:

Parent Signature:

Date:

### **HELPFUL INFORMATION**

**IRS Data Retrieval** (DRT electronically transfers your 2018 IRS tax information to your FAFSA) directions can be found at <https://studentaid.ed.gov/sa/resources/irs-drt-text>

**IRS Tax Transcripts** can be ordered online at <https://www.irs.gov/individuals/get-transcript>

**Verification of Non-Filing Letter** can be ordered online at <https://www.irs.gov/individuals/get-transcript>

**FORM 4506-T** can be printed directly from <https://www.irs.gov/forms-instructions>