

2022-2023 Low Income Form Independent Student

A. Student's Information

| Student's Last Name | Student's First Name | Student's M.I. | Student's Social Security Number |
|------------------------------|-------------------------|--|----------------------------------|
| Student's Street Address (in | clude apt. no.) | Student's Date of Birth | |
| City | State | Zip Code | Student's Email Address |
| Student's Home Phone Num | ber (include area code) | Student's Alternate or Cell Phone Number | |

B. Student's Family Information

List below the people in your household. Include:

- Yourself
- Your spouse, if you are married
- Your children, if any, if you will provide more than half of their support from July 1, 2022, through June 30, 2023, or if the children would be required to provide your information if they were completing a FAFSA for 2022–2023. Include children who meet either of these standards, even if they do not live with you.
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2023.

Include the name of the college for any household member, who will be enrolled <u>at least half time</u> in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2022, and June 30, 2023. *If more space is needed, attach a separate page with the student's name and Social Security Number or student ID at the top.*

| Full Name | Age | Relationship | College | Will be Enrolled at Least Half Time |
|-----------------------|-----|--------------|--------------------|--|
| Missy Jones (example) | 18 | Sister | Central University | Yes |
| | | Self | | |
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WE WILL RETURN ANY INCOMPLETE OR UNSIGNED FORMS FOR CORRECTION. IF YOU HAVE QUESTIONS CONCERNING THIS FORM, PLEASE CALL: Troy (518) 244-4525 or Albany (518) 292-1783

C. Student & Spouse Tax Filing Information

| Tax Filing Information | Student | Spouse (if applicable) |
|---|---------|------------------------|
| 1. Did you file a tax return for 2020? | | |
| | Yes: | Yes: |
| If yes, you must submit a 2020 signed | | |
| federal tax return or IRS Tax Return | No: | No: |
| Transcript* | | |
| 2. Did you work and earn income in | | |
| 2020 but not required to file a tax | Yes: | Yes: |
| return? | | |
| If you way must submit service of all MQ's for | No | No |
| If yes, you must submit copies of all W2's for 2020 | No: | No: |
| 3. Did you earn \$0 income from | | |
| working in 2020? | Yes: | Yes: |
| Working in 2020 | 100. | 100. |
| | No: | No: |
| | | |

*A Tax Return Transcript can be requested at www.irs/gov/transcript. Choose a Tax Return Transcript for 2020

D. Other Untaxed Income and Benefits for 2020 (Please report any other household income so we can award you the most aid possible. Do not leave blanks, report \$0 or NA if the income listed does not pertain to you or members of your household) Reporting \$0 income for all parties will require us to request additional information on your household expenses and income.

| Untaxed Income & Benefits for 2020 Indicate Yearly Totals | Student/Spouse (include spouse if applicable) |
|--|--|
| Untaxed wages, salaries, and tips | \$ |
| SNAP (Supplemental Nutrition Assistance Program) | \$ |
| TANF (Temporary Assistance for Needy Families) | \$ |
| WIC (Woman, Infants, Children): | \$ |
| Free/Reduced Lunch: | \$ |
| Social Security Benefits: | \$ |
| Workman's Compensation | \$ |
| Child Support Received | \$ |
| Child Support Paid | \$ |
| Alimony | \$ |
| Unemployment Benefits | \$ |
| Money paid on your behalf | \$ |

E. Living Expenses for 2020

| Living Expenses for 2020 Indicate Yearly Totals | Student |
|---|---------|
| Rent or mortgage payment: | \$ |
| Food: | \$ |
| Electric: | \$ |
| Heating/Cooling: | \$ |
| Water/sewer/garbage: | \$ |
| Phone expenses: | \$ |
| Cell phone: | \$ |
| Cable/internet services: | \$ |
| Life, car, medical, home insurance: | \$ |
| Car payments: | \$ |
| Credit card payments: | \$ |
| Personal (clothing, health, beauty, entertainment): | \$ |

F. Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student's Signature

Date

Date

Spouse's Signature (optional)

Return completed form to: Russell Sage College, Attn: Financial Aid Office, 65 First Street, Troy, NY 12180