

## 2023-2024 HEOP EZ Pre-Eligibility and Financial Aid Verification Worksheet

A.	De	pen	dent	Stude	nt's	Info	rmation
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Student's Last Name	Student's First Name	Student's M.I.	Student's Social Security Number
Student's Street Address	(include apt. no.)		Student's Date of Birth
City	State	Zip Code	Student's Email Address

## **B.** Dependent Student's Family Information

I. Parent Marital Status as of the date completing this form: (circle or	I Parent M	farital Status	s as of the date	completing this	form: (circle one
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Married Divorced Separated Never Married Both Parents Living Together Widowed

- II. List below the people that currently live with you and your parent that you have included on your FAFSA Include:
  - Yourself and your parent(s) (including a stepparent)
  - Your parent(s)' other children if your parent(s) will provide more than half of their support from July 1, 2023, through June 30, 2024, or if the other children would be required to provide parental information if they were completing a FAFSA for 2023–2024.
  - Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2024.

Include the name of the **college** for any family 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, 2023, and June 30, 2024. *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	Relation hip	College	Will be Enrolled at Least Half Time
Missy Jones (example)	18	Sister	Central University	Yes
		Self		

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Student'	's Name:		SSN:			_
Parer	nt Income Information and Student	t & Parent Ta	x FilingInfo	rmation		
I. Pa	rent Income Information					
	Mother/Step-mother's total income fi	om work in 202	1:			
	Father/Step-father's total income from	n work in 2021:				
	Student and Parent Tax Filing Info	ormation:				
	Tax Filing Information	Stu	dent		Parent	
	1. Did you file a tax return for 2021?	Yes:	-	Yes:		
f	If yes, you must submit copies of all W2's for 2021 <b>AND</b> a signed federal tax return (1040) or IRS Tax Transcript*	No:		No:		
	Did you work in 2021 and earn income BUT did not or are not required to file a federal tax return?  If yes, you must submit copies of all W2's for 2021	Yes:	-	Yes:		
	3. Did you earn \$0 income in 2021?	Yes:	-	Yes:		
		No:		No:		
	Tax Return Transcript can be requested at wind ublic Assistance Information and Upublic Assistance Information (TANF)	-			·	<b>)2</b> 1
1.	Did you or your family receive assista	nce from <b>Social</b>	Services in 200	119	Yes No	
	If so, what type of assistance was it? C				105 110	
	• •	**	TC Other			
II.	Untaxed Income and Benefits for 2021 (P			was not ap	plicable)	
	Untaxed Income & Benefits fo	or 2021	Stude	nt	Parent	

Untaxed Income & Benefits for 2021	Student	Parent
Indicate Yearly Totals		
Social Security Benefits	\$	\$
Workman's Compensation	\$	\$
Child Support Received	\$	\$
Unemployment Benefits	\$	\$

dent's Name:	SSN:	
Are there any special circumstances you wish to share ***Enclose additional sheet for special circumstances infor	· · · · · · · · · · · · · · · · · · ·	Yes No
Additional Comments:		
. Certification and Signatures		
Each person signing this worksheet certifies that all of student and one parent must sign and date. Please sign pen, please skip Part I of this section and move on to I misleading information on this worksheet, you may	in pen. If you are unable to print this for	rm out and sign i
I. By signing my name below, I certify that all of the		
Student's Signature	Date	
Parent's Signature	Date	
II. Please only complete Part II of this section if yo	ou are unable to complete Part I in pen.	
Student Certification and Signature:		
☐ By checking this box, I certify that all of the above is true and correct, and this serves as my signature I will need to provide a physical signature at time.	e. <b>I understand</b>	
	1	
Parent Certification and Signature:	•	

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

For electronic submissions, please scan this document prior to uploading. Feel free to use a traditional scanner or the <u>Adobe PDF Scanner App</u> (available for iOS and Android). <u>Photographs will not be accepted.</u>

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