# **Dual Credit**



# 2022-23 Application for Financial Aid

# **Section I: Student Information**

Name	
Street address	
City	State Zip
Home Phone	Cell
Email address	
Date of Birth (MM/DD/YYYY)	College Student ID #
High School	
High School City	Expected Graduation
Grade Level Beginning in August 2022	Junior Senior

# **Section II: Household Information**

Please list the names of ALL family members, including your parent(s), who will be <u>supported by your</u> <u>parent(s)</u> from July 1, 2022 to June 30, 2023 (attach additional sheets if necessary)

\*If you do not live with your biological, step or adoptive parents, please see your high school counselor for additional instructions.

Names [Include parent(s) and sibling(s)]	Age	Relationship to Student	Which college/university will students be attending? (if applicable)
		Self	
Total number in household		Total num	ber in college in 2022-2023

# Section III: Additional Information

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Parent:	
<ol> <li>Did your parents work in 2020:</li> <li>If yes, did they file an income tax return for 2020?</li> <li>Yes (Attach complete 2020 tax return-must be signed)</li> <li>No</li> <li>Will file</li> </ol>	<ul> <li>2. What is your parent's marital status?</li> <li>Married/Remarried</li> <li>Widowed</li> <li>Never Married</li> <li>Separated/Divorced</li> <li>Unmarried and both parents living together</li> </ul>
3. Mother's highest level of education completed Middle school/Jr. High High School College or beyond Unknown/Other	4. Father's highest level of education completed Middle school/Jr. High College or beyond Middle School
5. Enter your mother's age	6. Enter your father's age
Date of Birth MM/DD/YYYY	Date of Birth MM/DD/YYYY

Print full name here:

# Section IV: Income and Assets

Complete both Student and Parent(s) columns. Do not leave blanks. Enter "0" where appropriate.

	Student	Parent(s)	
Part A. Annual Untaxed Income			
1. Child support received	\$	\$	
2. Tax exempt interest income	\$	\$	
3. Housing, food, and other living allowances someone else paid on your behalf	\$	\$	
<ol> <li>Other untaxed income not reported, such as worker's compensation, disability, SSI, etc.</li> </ol>	\$	\$	
5. Money you received (or bills someone else paid for you) not reported elsewhere on this form	\$	\$	
6. Cash earnings (wages not listed on taxes or W-2 forms)	\$	Mother Father \$ \$	
Total Untaxed Income (add lines 1-6)	<b>J</b>	\$	
Part B. Additional Financial Information			
7. Child support paid	\$	\$	
8. Taxable earning from college work-study or other college need-based work programs	\$	\$	
<ol> <li>Taxable scholarships and grants reported on 2020 income tax return</li> </ol>	\$	\$	

#### Print full name here:

Part C. Assets		
10. As of today, balance of cash, savings, and checking accounts	\$	\$
11. As of today, investment net worth (do not include the home you live in or the balance of retirement plans)	\$	\$
12. As of today, net worth of current business(es) or investment farms(s)	\$	\$
	Defect following have	

Print full name here:

Part D. Federal Assistance Programs				
13. At any time during 2021 or 2022, did a	inyone in your hous	ehold receive benefits from a	any of th	e federal programs
listed? Mark all that apply (leave bla	nk if not applicable	).		
Medicaid or Supplemental Security Income (SSI)	WIC SNAP	Free or Reduced Price Lunch		Temporary Assistance for Needy Families (TANF)

#### **Section V: Total Family Income**

#### Was your TOTAL FAMILY INCOME less than \$7,000 in 2020?

(TOTAL FAMILY INCOME is the income reported on your parent's and your W-2 IRS tax forms plus the Total Untaxed Income reported on Section IV, Part A of this form for you and your parent(s))

🗌 Yes 🗌 No

**If YES**, please include a breakdown of your living expenses (e.g., rent, food, utilities, etc.) and provide a written summary that explains how you were able to pay for your living expenses in 2020 Attach additional sheet(s) if necessary.

Print full name here:

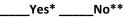
#### Section VI: Statement of Selective Service Registration Status

Certification of registration status (Please check the appropriate box.)
I certify that I am a female and, therefore, not required to register with the Selective Service System
I certify that I am a male age 18 to 25 and am registered with the Selective Service System
PLEASE ATTACH COPY OF REGISTRATION ACKNOWLEDGEMENT
I certify that I am not of an age required to register with the Selective Service System. (That is, I am over 25.)
I certify that I have been determined by the Selective Service System to be exempt from registration.
I certify that I have not reached my 18th birthday and understand that I will be required by law to register at that time.
🗌 I certify that I do not have a Social Security Number, but have submitted my Selective Service registration form to the
Selective Service System and will provide proof of registration to Northeast as soon as I receive my registration number.

#### Section VII: Eligibility Statement

#### **Statement of Student Eligibility**

Have you ever been convicted of a felony or an offense under Chapter 481, Health and Safety Code (Texas Controlled Substances Act), or under the law of another jurisdiction involving a controlled substance as defined by Chapter 481, Health and Safety Code?



\* If your answer is yes, contact the financial aid office to determine your eligibility to receive this grant.

\*\* If your answer is no, it is your responsibility to inform the financial aid office if this status changes at any time while attending the institution.

I hereby certify that the information I have provided in this statement is true and correct. I understand that if I fail to provide accurate information, I may be required to reimburse the institution and penalties may be imposed. I also understand that it is my responsibility to inform the financial aid office if my status concerning this statement of eligibility changes at any time while attending this institution.

#### Section VIII: Signatures

#### **Student and Parent signatures**

I understand that under Texas Education Code, Section 51.9095, I must be registered with the Selective Service System according to the requirements of federal law in order to receive student financial aid funds from the State of Texas, and herby certify that I meet this requirement. I also certify that I will use student financial aid to pay only the cost of attending an institution of higher education, and that the information provided on this form is true, complete, and correct to the best of my knowledge. I understand that any false statements may void my eligibility for financial aid. I also certify that the information provided on this form sit used only for evaluation of eligibility for financial aid and that I may need to provide additional information for my school to determine eligibility for financial aid.

Student Signature	Date
Parent Signature	Date

To ensure processing prior to the payment due date for fall 2022 classes, <u>complete application and all required supporting documentation</u> must be received by Northeast Texas Community College by June 1, 2022.