



Financial Aid Office

Contact Info

2021-2022 Parent Additional Financial Information

Student Information

Name: _____ CWID: _____

Please complete the chart below. Please enter \$0's in any space where the answer is \$0. Do not leave spaces blank.

| Parent(s) | 2019 ADDITIONAL FINANCIAL INFORMATION |
|-----------|--|
| \$ | Child support paid because of a divorce or separation or as a result of a legal requirement. Don't include support for children in your household, as reported on FAFSA question 93. |
| \$ | Taxable earnings from need-based employment programs such as Federal Work-Study and need-based employment portions of fellowships and assistantships. |
| \$ | Taxable grant and scholarship aid reported to the IRS in the adjusted gross income. Includes AmeriCorps benefits (awards, living allowances, and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships. |
| \$ | Combat pay or special combat pay. Only enter the amount that was taxable and included in the adjusted gross income. Do not enter untaxed combat pay reported on the W-2 (Box 12, Code Q). |
| \$ | Earnings from work under a Cooperative Education Program offered by a college. |
| Parent(s) | 2019 UNTAXED INCOME |
| \$ | Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings) including, but not limited to, amounts reported on the W-2 Form (Boxes 12a through 12d, codes D, E, F, G, H, and S). Don't include amounts reported in code DD (employer contributions toward employee health benefits). |
| \$ | Child support you received for all children. Do not include foster care or adoption payments. |
| \$ | Housing, food and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits). Do not include the value of on-base military housing or the value of basic military allowance for housing. |
| \$ | Veterans' non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances. |
| \$ | Other untaxed income not reported, such as worker's compensation, disability, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Line 25, Railroad Retirement Benefits, etc. DO NOT INCLUDE: Extended foster care benefits, student aid, earned income credit, additional child tax credit, TANF payments, untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Investment Act educational benefits, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (e.g. cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels. |
| \$ | Money received , or paid on your behalf (e.g., bills), not reported elsewhere on this form. This includes money that you received from a parent or other person whose financial information is not reported on this form and that is not a part of a legal child support agreement. |

Certification and Signature

By signing this worksheet, I certify that all information reported on this worksheet 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

Parent Signature

Date

Office Use Only

Aid Year: _____ Campus: _____ Date: _____ RRAAREQ Code: _____ Status Code: _____ Initials: _____