Student ID:	

Student's Name: (Legal full-name)

First



Last

Financial Aid



Date Received:

Date Scanned: _____

V11.06.2018

М



Financial Aid





For assistance completing this form contact the Financial Aid Contact Center at (281)290-2700 or E-mail FACC@Lonestar.edu

2018-2019

STATEMENT OF STUDENT ELIGIBILITY

Student ID:				Student's Name:	Last	First	MI
Date of Birth:	Month	Day	/ Year	- Phone:		– LSC E-mail: –––––	
				STUDENT [DATA		
,				e under Chapter 481, Hea as defined by Chapter 48		Code (Texas Controlled Substances Ac afety Code?	t), or under the law
No		Yes*					
Note:							
*If your answer i	s yes, please	contact	the Financ	cial Aid Office to determine	e your Texas Edu	ucational Opportunity Grant (TEOG) e	ligibility.
**If your answer	is no, it is yo	our respo	onsibility to	o inform the financial aid of	ffice if this status	s changes at any time while attending	the institution.
		REF		CE: STATUTORY PRO	OGRAM RE	STRICTIONS	
A person is not eligible	to receive an	n initial o	or renewa	Texas Educational Opport	unity Grant (TEC	OG)	
	diction involvi	ing a cc	ontrolled su	ubstance as defined by Cho		fety Code (Texas Controlled Substance th and Safety Code, unless the person	
		-	-	as Department of Criminal . ve elapsed from the date o		ectional facility or completed a period completion; or	of probation
ceive a grant u				e expunged from the persor	i's record, or otl	herwise has been released from the ine	eligibility to re-
Citations: TEXAS Grant: Initio 56.305(b)	al Awards TE	C 56.3(04(b) Rene	ewal Awards TEC 56.305(k	b) TEOG Grant:	Initial Awards TEC 56.404(b) Renewo	al Awards TEC
				CERTIFICA	ΓΙΟΝ		
	responsibility			formation, I may be require	ed to reimburse	ormation I have provided in this statem the institution and penalties may be in s statement of eligibility changes at any	nposed. I also
Student Signature:						Date:	
		REQ	UIRED S	TATEMENT OF SEL	ECTIVE SER	RVICE STATUS	
All Students must compl	ete						
lf you were you bo	orn a female o	check [
lf you were born a	male please	comple	ete section	below:			
Are you currently r	registered for	Selectiv	e Service,	as required by federal law	ş		
(Proof of reg	ered gistration required)	Not Reg	istered Exempt (Documentatio	n required)		

Stud	ent	ID:
Stud	lent	ID:

Student's Name:

First

Last

Date:

М

CERTIFICATION

I,	, hereby certify that the selective service status provided is true and correct. I
understand that I must provide documentation if requested by my insti	tution that I may be required to complete a new statement for each academic year
for continued eligibility.	
	1

Student Signature:

FOR OFFICE USE ONLY								
No Yes (with documentation)								
Financial Aid Designee Signature:	Date:							

Please return this completed form to your nearest campus:

LSC-CyFair Financial Aid Office/CASA 105 9191 Barker Cypress Road Cypress, TX 77433-1383

LSC-Tomball Financial Aid Office/South Building-S114 30555 Tomball Parkway Tomball, TX 77375-4036 LSC–North Harris Financial Aid Office/SSB 102 or 101 2700 W.W. Thorne Drive Houston, TX 77073-3499

LSC–Montgomery Financial Aid Office/Building C-105 3200 College Park Drive Conroe, TX 77384-4500 **LSC–Kingwood** Financial Aid Office/SCC 134 20000 Kingwood Drive Kingwood, TX 77339-3801

LSC–University Park Financial Aid Office/Building 12 Suite 233A 20515 SH 249 Houston, TX 77070

TASFA CHECKUST Student's Name:	LONE STAR COLLEGE Financial Aid				For assistance completing thi Financial Aid Contact Center or E-mail FACC@Lonestar.ed	r at (281)290-2700
Ident First Mit Date of Birth: // / Phone: LSC E-mail: Mode bill 1403/Sende Bill 1528 edor; House Bill 1328 edor; House Bill 13	TASFA CHECKLIST				20	18—2019
Date of Birth:	Student ID:	Student's Name:				
Sestion allows certain categories of foreign-born and immigrant students in the State of Texas to qualify for readends under Texas Education Code Chapter 54, Section 54.052(a)(3). This state law allows such students to pay the resident futition rate while attending public institutions of higher education in Texas, and be classified as state residents for futition purpose. As Texas residents, such students are eligible to apply for some student financial aid programs offered by the State of Texas. TECC ELIGIBILITY REQUIREMENTS For complete eligibility requirements please visit www.collegeforaltexans.com. e Are Texas residents for 3 years prior to graduation and graduated from an accredited high school in Texas (not earlier than 1998-1999 school year). • Must meet the State Standards of Academic Progress (SAP). see link above for requirements • Continuing recipients must meet minimum requirements set by THECB. • Have not been convicted of a felony or crime involving a controlled substance. • Must not have earned an associate or baccalaureate degree. Be enrolled at least 1/2 time in an undergraduate degree or cerdificate program, at a 2 year institution. Must not have attempted more than 30 semester credit hours (SCH). (excluding credits for dual enrollment or by examination). (For Initial Only) CERTIFICATION CERTIFICATION Certify that the information provided herein is true and correct to the best of my knowledge. I also understand that if 1 purposely give false or misleading information in connection with my application for federal aid, 1 may be subject to a fine of up to \$20,000, sent to prison, or bah.	·	Phone:		Last		MI
For complete eligibility requirements please visit www.collageforalItexans.com. Are Texas residents for 3 years prior to graduation and graduated from an accredited high school in Texas (not earlier than 1998-1999 school year). • Must meet the State Standards of Academic Progress (SAP). • Have not been convicted of a felony or crime involving a controlled substance. • Continuing recipients must meet minimum requirements set by THECB. • Demonstrates financial need. • Must not have earned an associate or baccalaureate degree. Be enrolled at least 1/2 time in an undergraduate degree or certificate program, at a 2 year institution. Must not have attempted more than 30 semester credit hours (SCH). (excluding credits for dual enrollment or by examination). (For Initial Only) CERTIFICATION I certify that the information provided herein is true and correct to the best of my knowledge. I also understand that if 1 purposely give false or misleading information in connection with my application for federal aid, 1 may be subject to a fine of up to \$20,000, sent to prison, or both. Student Signature: Date: TO BE COMPLETED BY FINANCIAL AID DEPARTMENT Check the appropriate box: MAIL If mailed is <i>Identify and Statement of Educational Purpose</i> Attached? YES NO IN PERSON School Official Printed Name: IN PERSON IN PERSON	Session allows certain categories of foreign-born Chapter 54, Section 54.052(a)(3). This state law education in Texas, and be classified as state re financial aid programs offered by the State of Te	and immigrant students in th allows such students to pay sidents for tuition purposes. A was.	ne State the re As Texc	e of Texas to c sident tuition r as residents, su	qualify for residency under Texas E ate while attending public institutio uch students are eligible to apply fo	ducation Code ons of higher
 Are Texas residents for 3 years prior to graduation and graduated from an accredited high school in Texas (not earlier than 1998-1999 school year). Have not been convicted of a felony or crime involving a controlled substance. Demonstrates financial need. Have an EFC less than or equal to \$5,609. Have an EFC less than or equal to \$5,609. Register for Selective Service or be exempt from this requirement. CERTIFICATION I certify that the information provided herein is true and correct to the best of my knowledge. I also understand that if 1 purposely give false or misleading information in connection with my application for federal aid, I may be subject to a fine of up to \$20,000, sent to prison, or both. Student Signature: Date: TO BE COMPLETED BY FINANCIAL AID DEPARTMENT Check the appropriate box: MAIL If mailed is <i>Identity and Statement of Educational Purpose</i> Attached? YES NO School Official Printed Name: 					TS	
 Have not been convicted of a felony or crime involving a controlled substance. Demonstrates financial need. Have an EFC less than or equal to \$5,609. Have an EFC less than or equal to \$5,609. Register for Selective Service or be exempt from this requirement. CERTIFICATION I certify that the information provided herein is true and correct to the best of my knowledge. I also understand that if 1 purposely give false or misleading information in connection with my application for federal aid, I may be subject to a fine of up to \$20,000, sent to prison, or both. Student Signature: Date: 	 Are Texas residents for 3 years prior graduated from an accredited high s 	to graduation and chool in Texas (not	•	Must meet		demic Progress
Have an EFC less than or equal to \$5,609. degree. Be enrolled at least 1/2 time in an undergraduate degree or certificate program, at a 2 year institution. Must not have attempted more than 30 semester credit hours (SCH). (excluding credits for dual enrollment or by examination). (For Initial Only) CERTIFICATION I certify that the information provided herein is true and correct to the best of my knowledge. I also understand that if I purposely give false or misleading information in connection with my application for federal aid, I may be subject to a fine of up to \$20,000, sent to prison, or both. Student Signature: Date: TO BE COMPLETED BY FINANCIAL AID DEPARTMENT Check the appropriate box: MAIL If mailed is <i>Identity and Statement of Educational Purpose</i> Attached? KERSON School Official Printed Name:		or crime involving a		-	recipients must meet minim	um
Have an EFC less than or equal to \$5,609. undergraduate degree or certificate program, at a 2 year institution. Must not have attempted more than 30 semester credit hours (SCH). (excluding credits for dual enrollment or by examination). (For Initial Only) CERTIFICATION I certify that the information provided herein is true and correct to the best of my knowledge. I also understand that if I purposely give false or misleading information in connection with my application for federal aid, I may be subject to a fine of up to \$20,000, sent to prison, or both. Student Signature: Date: TO BE COMPLETED BY FINANCIAL AID DEPARTMENT Check the appropriate box: MAIL If mailed is <i>Identity and Statement of Educational Purpose</i> Attached? IN PERSON School Official Printed Name:	Demonstrates financial need.					
requirement. dual enrollment or by examination). (For Initial Only) CERTIFICATION I certify that the information provided herein is true and correct to the best of my knowledge. I also understand that if I purposely give false or misleading information in connection with my application for federal aid, I may be subject to a fine of up to \$20,000, sent to prison, or both. Student Signature: Date: TO BE COMPLETED BY FINANCIAL AID DEPARTMENT Check the appropriate box: MAIL If mailed is <i>Identity and Statement of Educational Purpose</i> Attached? YES NO IN PERSON School Official Printed Name:	Have an EFC less than or equal to \$5	5,609.		undergradu	uate degree or certificate pr	ogram, at a 2
I certify that the information provided herein is true and correct to the best of my knowledge. I also understand that if I purposely give false or misleading information in connection with my application for federal aid, I may be subject to a fine of up to \$20,000, sent to prison, or both. Student Signature: Date: TO BE COMPLETED BY FINANCIAL AID DEPARTMENT Check the appropriate box: MAIL If mailed is <i>Identity and Statement of Educational Purpose</i> Attached? YES NO IN PERSON School Official Printed Name:	•	xempt from this				-
false or misleading information in connection with my application for federal aid, I may be subject to a fine of up to \$20,000, sent to prison, or both. Student Signature: Date: TO BE COMPLETED BY FINANCIAL AID DEPARTMENT Check the appropriate box: MAIL If mailed is <i>Identity and Statement of Educational Purpose</i> Attached? YES NO IN PERSON School Official Printed Name:		CERTIFICA		N		
TO BE COMPLETED BY FINANCIAL AID DEPARTMENT Check the appropriate box: MAIL If mailed is <i>Identity and Statement of Educational Purpose</i> Attached? YES NO IN PERSON School Official Printed Name: In the second sec	false or misleading information in connection					
Check the appropriate box: MAIL If mailed is Identity and Statement of Educational Purpose Attached? YES NO IN PERSON School Official Printed Name:	Student Signature:				Date:	
 MAIL If mailed is <i>Identity and Statement of Educational Purpose</i> Attached? YES NO IN PERSON School Official Printed Name: 	TO BE	Completed by finan	ICIAI	L AID DEPA	RTMENT	
IN PERSON School Official Printed Name:	Check the appropriate box:					
School Official Printed Name:	MAIL If mailed is <i>Identity and S</i>	Statement of Educations	al Purj	<i>oose</i> Attach	ned? YES	
Sahaal Official Signature:	School Official Printed Name:					
	School Official Signature:				Date:	

Student ID:	 Student's Name:			
		Last	First	М

If you require assistance or have questions concerning your application, please visit the Lone Star College Financial Aid Department. Completed TASFAs will be processed within 7–10 business days. If you do not receive notification after 10 business days, please contact the financial aid office to check on the status of your application.

REQUIRED DOCUMENTS CHECKLIST (COM	REQUIRED DOCUMENTS CHECKLIST (COMPLETED BY FINANCIAL AID DEPARTMENT)									
All items must be submitted each year you apply to determine financial	aid eligibility.									
 Final Official High School Transcripts and SB 1528 Affidavit On-File With Admissions Date Reviewed: 	Parent's Tax Return Transcript/IRS Verification Letter of Non-Filing IRS Request Date:									
Proof of Identity: Driver License Foreign Passport Visa Employment Authorization Card	 Selective Service Registration (https://www.sss.gov/) Males between the ages of 18 and 25, must register with the Selective Service. Date of Registration: 									
Matrícula Consular See Proof of Identity page in the TASFA packet for a list of acceptable ID: if unable to provide ID see your Financial Aid Department.										
TASFA Application with Statement of Student Eligibility	Residency:									
 Student Tax Return Transcript/IRS Verification Letter of Non-Filing IRS Request Date:	Did the student previously receive the Texas Grant at another institution? Yes No									

Please return this completed form to your nearest campus:

LSC-CyFair Financial Aid Office/CASA 105 9191 Barker Cypress Road Cypress, TX 77433-1383

LSC–Tomball Financial Aid Office/South Building-S114 30555 Tomball Parkway LSC–North Harris Financial Aid Office/SSB 102 or 101 2700 W.W. Thorne Drive Houston, TX 77073-3499

LSC-Montgomery Financial Aid Office/Building C-105 3200 College Park Drive LSC-Kingwood Financial Aid Office/SCC 134 20000 Kingwood Drive Kingwood, TX 77339-3801

LSC–University Park Financial Aid Office/Building 12 Suite 233A 20515 SH 249



Student's ID's must use legal full-name name to match TASFA and Admissions records and ID's are not acceptable if legal full-name is not used. Below are acceptable forms of identification.

• Texas Driver License/Texas State ID

• Foreign Passport (can be expired)





• Visa



Matrícula Consular



• Employment Authorization Card



If none of these options are applicable, please visit your Financial Aid Office.

2018-19 TASFA

Texas Application for State Financial Aid

July 1, 2018 – June 30, 2019

The Texas Application for State Financial Aid (TASFA) is used to collect information to help determine eligibility for state financial aid programs that are administered by institutions of higher education in the state of Texas. Students that are classified as a Texas Resident who cannot apply for federal financial aid using the Free Application for Federal Student Aid (FAFSA) are encouraged to complete the TASFA. To review the FAFSA filing requirements, visit <u>www.fafsa.ed.gov</u> or visit the financial aid office at the institution you plan to attend for the 2018-19 award year. Please note that Texas Residency can only be determined by the institution that you plan to attend. This application cannot be used to determine your state residency status or final eligibility for state aid.

To complete this application, each item within the applicable sections must be answered. For clarification on specific items, please reference the Notes section. If you have further questions, contact the financial aid office at your institution.

Texas state priority deadline for many institutions of higher education is **March 15, 2018** for the 2018-19 award year. It is recommended that applicants complete and submit this application and any other required documentation to the financial aid office prior to the state priority deadline date.

STEP O	IE: STUD	DENT IN	FORN	IATION	l (See N	lotes for q	uestions 5	-6)												
1. Last N	ame							2	. First Name									3. M.I.		
4. Date o	of Birth					l Security I or Not Ap		r					6. 0	Colleg	ge Studen	t ID				
7. Perma	nent Mai	iling Ado	dress																	
8. City						9. State		10.	Zip Code			1	1. Phone	Num	nber					
12. Emai	l Address								1	Altern	ate Em	ail:								
	t will you u begin c							al Ed	l diploma lucational De	evelop	oment (0	GED)	certificat	e	N	omeso one of	the	above		
14. High (If applicabl	School Na ^{e)}	ame																		
15. High (If applicabl	School Ci [.] e)	ty									State plicable)				7. Date of raduatior					
18. Will y	ou have	your firs	st bach	elor's d	egree b	efore you	begin the	201	8-19 school	year?	Y	'es	No	-						
19. Wha	t will you	r grade	evel b	e when	you beĮ	gin the 201	.8-19 scho	ool y	earr		egree o .8-19 sc			vill ya	ou be wor	king o	n wł	nen youl	oegin	
Never at (No college		ollege							1st ba	1st bachelor's degree						ן				
	undergra								🔲 2nd b	achel	or's de	gree]
	undergra			nore											tion or trans					ן
3rd year (60-90 colle	undergra ge credits to	duate/j owards dep	unior _{gree)}						🗆 Certif	icate	or diplo	oma								ן
	undergra								1000	Teaching credential						נ				
5th year/other undergraduate								Graduate or professional degree						ן						
1st year graduate/professional							🗖 Othei	Other/undecided]						
Continui	Continuing graduate/professional or beyond							🗖												

STE	P ONE: STUDENT INFORMATION CONTINUED (See Notes for quest	tions 24-29)		
	Where do you plan to live during the 2018-19 school year? On campus Off campus With parent or relative	25. Have you been convicted of a felony or a crime inv substance?	olving a coi	ntrolled
22.	At the start of the 2018–19 school year, how many credits/hours will	Yes No		
	you be enrolled in?	26. Have you previously received state Financial Aid?		
	Full-time (12 hours or more) Three-quarter time (9-11 hours) Half-time (6-8 hours) Less than half-time (5 hours or less)	Yes No		
	Not sure	27. (A) Are you interested in being considered for the Texas College Work-Study program?		
	f you are transferring schools, have you earned an Associate Degree?	Yes No Don't know		
	Yes	(B) If yes, do you have authorization to work in the	U.S.?	
	Enter the date you earned an Associate Degree)	Yes No Don't know N	ot applicabl	e
24.	Where you born male or female?	28. As of today, what is your marital status?		
	Male	□ I am single □ I am separa □ I am married/remarried □ I am divorce		und
	Female			leu
rega	der to qualify for state, aid males between the age of 18 and 25, rdless of residency, must register with Selective Service (with limited	29. Month and year you were married, remarried, sepa widowed.	arated, divo	orced or
	ptions). A copy of the registration acknowledgement card must be rided to the institution's financial aid office.	Month:Year:Not app	olicable 🗖	J
L				
STE	P TWO: STUDENT DEPENDENCY STATUS DETERMINATION (See No	tes for questions 20 and 25.40)		
	TWO. STODENT DEPENDENCT STATOS DETERMINATION (BEEND			
30.	Were you born before January 1, 1995?		Yes	🗌 No
	As of today, are you married? (Also answer yes if you are separated but not div		Yes	🗌 No
32.	At the beginning of the 2018-19 school year, will you be working on a mas	ster's or doctorate program?	Yes	No
	(e.g. MA, MBA, JD PhD, EdD, MD, etc.)			
33.	Do you now have or will you have children who will receive more than ha June 30, 2019?			
34.	Do you have dependents (other than your children or spouse) who live w		Yes	No No
	support from you, now and through June 30, 2019?		🗌 Yes	🗌 No
35	At any time since you turned age 13, were you in foster care, were you a			
26	parent(s) deceased? (You do not have to currently be a ward of the court)		Yes	🔲 No
	As determined by the state's court, are you or were you an emancipated of As determined by the state's court, does someone other than your parent		Yes	No
	At any time on or after July 1, 2017, did your high school or school district		Yes	No No
50.	unaccompanied youth who was homeless or were self-supporting at risk		Yes	🗌 No
39.	At any time on or after July 1, 2017, did the director of an emergency she			
	U.S. Department of Housing and Urban Development, determine that you were self-supporting and at risk of being homeless?		— 7	
40.	At any time on or after July 1, 2017, did the director of a runaway or hom		Yes	No No
	determine that you were an unaccompanied youth who was homeless or	r were self-supporting and at risk of being		
	homeless?		Yes	No No

STEP THREE: PARENT INFORMATION (See Notes for questions 41-56)

If you answered "**No**" to all the questions in **STEP TWO**, you must include parental information, even if you do not live with your legal parents (biological, adoptive, or as determined by the state [for example, if the parent is listed on the birth certificate]). Grandparents, foster parents, legal guardians, widowed stepparents, aunts, uncles, and siblings are **not** considered parents on this form, unless they have legally adopted you.

If your legal parents are married to each other, or are not married to each other and **live together**, answer the questions about both of them. If you are in a single parent home (e.g. parent(s) was never married or is remarried, divorced, separated, etc.), review the TASFA Notes for further clarification.

PARENT'S MARIT	AL STATU	s							
41. As of today, wh Married or Ren Divorced or Sep Unmarried and	narried parated	arital status of yo Never Married Widowed Its living together		42. Month and year your parents were married, remarried, separated, divorced or widowed: Month: Year: Not applicable					
PARENT 1 (Mothe	er/Father/S	tepparent)							
43. Last Name				44. Firs	t Name				
45. Date of Birth			46. Social Security Numbe or DACA # or Not Applicab				4	7. Phone Number	
48. Email Address									
49. Highest level o	f education	completed.	Middle School/Jr. High	High So	chool	College o	r Beyond	d Other/Unkno	wn
PARENT 2 (Mothe	er/Father/S	tepparent)				-			
50. Last Name				51. Firs	t Name				
52. Date of Birth			53. Social Security Numbe or DACA # or Not Applicab				5	4. Phone Number	
55. Email Address									
56. Highest level of	feducation	completed.	Middle School/Jr. High	High Sc	hool	College or	⁻ Beyond	Other/Unknow	vn
the questions in ST	EP TWO, yo	ou are only require	TEP TWO, you must include d to enter income information					P THREE. If you ansv	vered "Yes" to any of
PART A. EARNING		tes for question 5	7-66)	Paren	t Earning	75			
57. Did you (or spo		1 2016? Yes	s No		_	nt(s) work i	in 2016?	Yes N	lo
58. If yes, how muc	ch did you (a	and spouse) earn	from working in 2016?	63. If ye	es, how m	uch did you	ir parent	t(s) earn from work	ing in 2016?
Student:		Spouse:		Par	ent 1:		Pare	nt 2:	
59. Did you (or spo	use) file a 2	016 tax return?		64. Did	your pare	nt(s) file a	2016 tax	return?	
Student	Yes I	No		Par	ent 1	Yes	No		
•		No		Par	ent 2	Yes	No		
	ax return? I	f so, enter below				•	-	ntification Number (ow or mark N/A	(ITIN) used to file a
Student:				Par	ent 1:			N/ A	
Spouse:		N/A		Par	ent 2:			N/A	
61. As of today, are employed) worker		ouse) a dislocated	l (currently un-	66. As o worker		either of y	our pare	ents a dislocated (c	urrently un-employed)
Student	Yes 1	No Don't kn	ow	Par	ent 1	Yes	No	Don't know	
Spouse	Yes 1	No Don't kn	ow	Par	ent 2	Yes	No	Don't know	

2018-19 Texas Application for State Financial Aid (TASFA)

For questions, 67-71, if the answer is zero or apply to you, enter "0" DO NOT LEAVE ANY dollar yearly amounts with no cents.		STUDENT	SPOUSE (If applicable)	PARENT 1	PARENT 2
PART B. 2016 UNTAXED INCOME for 201	6 (See Notes for questions 67-	70)		-	
67. Child support received for any of your child	dren.				
68. Housing, food, and other living allowances	paid on your behalf.				
69. Other untaxed income not reported. (Such as worker's compensation, disability, etc.)					
70. Cash earnings (Wages not listed on taxes or W-2 for	orms)				
71. TOTAL UNTAXED INCOME		\$ 0.	00	\$ 0	.00
PART C. 2016 ADDITIONAL FINANCIAL IN	FORMATION (See Notes for (questions 72-74)			
72. Child support paid.					
73. Taxable earnings from work-study or othe	r need-based work programs.				
 Farnings from work under a cooperative e college. 	ducation program offered by a				
PART D. 2016 ASSETS (See Notes for quest	ions 75-77)				
75. As of today, what is the total current balan checking accounts?	nce of cash, savings, and				
76. As of today, what is the net worth of inves (Do not include the home you live in or the balance of					
77 . As of today, net worth of current business	ses and/or investmentfarms?				
PART E. FEDERAL ASSISTANCE PROGRAM	ıs				
78. At any time during 2017 or 2018, did you (Mark all that apply (leave blank if not app		household receive ber	nefits from any of th	e federal programs	listed?
Medicaid or Supplemental Suppler Security Income (SSI) Nutrition As Program (SN	sistance Reduced Price	Temporary <i>I</i> for Needy Famil		Special Su Nutrition Pro Infants, and C	gram for Women,
PART F. NON-TAX FILERS - Only complete parental information is required.	if you (and your spouse) did no	rt file taxes for 2016, o	r your parent(s) did	not file taxes for 20	016, if
79. Explain what sources of income or public additional information. (If you (your spouse) employment, and did not file taxes, please pro	and/or your parents did not	meet either of the IR	S Income filing thre	sholds from earnin	
Living Expenses Cost for th	e year To pay for living ex	penses listed, the follo	wing sources of ine	come were used:	
Rent \$ Food \$					
Food \$ \$					
\$					
\$					
\$					
\$					

STEP FIVE: HOUSEHOLD INFORMATION (See Notes for questions 80-81)

If you answered "**Yes**" to any of the questions in **STEP TWO**, list the people in your household in the chart below. Include yourself (and spouse) and your children if you will provide more than half of their support between July 1, 2018 and June 30, 2019 (even if they do not live with you). Do not include people that you will not provide more than half of their support between July 1, 2018 and June 30, 2019 (e.g. a roommate). Include any other people if they now live with you, and you provide and will continue to provide more than half of their support through June 30, 2019.

If you answered "**No**" to all of the questions in **STEP TWO**, list the people in your household in the chart below. Include yourself (even if you don't live with your parents), your parents and your parents' other children (even if they do not live with your parents) if your parents will provide more than half of their support from July 1, 2018 and June 30, 2019. Include any other people if they now live with your parents, and your parents provide and will continue to provide more than half of their support through June 30, 2019.

Full Name of each household member (Examples: parent(s), sibling(s), grandparent orspouse)	Age	Relationship to student (e.g. sister, son)	College/University (If applicable)
		Self	
80. Total number in household:	81. Total number in college for 2018–19:		-

STEP SIX: SIGNATURE(S)

82. I certify that I will use state 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 state financial aid. I also certify that the information provided on this form will be used only for evaluation of eligibility for state financial aid and that I may need to provide additional information for my school to determine eligibility for state financial aid.

Student Signature	Date	
Parent Signature*	Date	
*Only required if all questions in STEP TWO were answered "No"		
Mark which parent signed above.		

Parent 1 Darent 2

TASFA Notes

Texas Application for State Financial Aid

July 1, 2018 - June 30, 2019

The following notes are to provide additional clarification to the questions on the application. The blue items indicate a Student (and spouse) response is needed and the purple indicate a Parent(s) response is needed. If additional assistance is needed, please contact the institution's financial aid office that you currently attend or plan to attend for 2018-19.

STEP ONE: STUDENT INFORMATION

Notes for questions 5 and 6 (page 1)

Question 5. If you have been issued a social security card, enter your assigned number. If you have been approved for Deferred Action of Childhood Arrivals (DACA), enter your assigned social security number (SSN) through this program. If you don't have an assigned SSN, mark N/A.

Question 6. Enter your ID number issued by your college or university.

Notes for question 24 (page 2)

Enter your gender at birth.

In order to qualify for state aid, males between the age of 18 and 25, regardless of residency status must register with Selective Service (with limited exceptions). This requirement applies to any person assigned the sex of male at birth. The selective service registration form may be obtained at a U.S. Post Office or at <u>www.sss.gov</u>. Once submitted a copy of your registration acknowledgement card must be provided to the institution's financial aid office. If you are currently of the age and gender requiring registration with Selective Service, but knowingly and willfully fail to do so, you are not eligible to receive funds from the State of Texas <u>(Texas Education Code, Section 51.9095)</u>.

Notes for question 25 (page 2)

If you have been convicted of a felony or a crime involving a controlled substance (e.g. drugs, alcohol), enter **"Yes"**.

If "Yes", see your institution's financial aid office regarding additional documentation that may be requested (e.g. confirmation of eligibility).

Notes for question 26 (page 2)

State financial aid programs can include:

- Toward EXcellence, Access and Success (TEXAS) Grant
- Texas Educational Opportunity Grant (TEOG)
- Tuition Equalization Grant (TEG)
- Texas College Work-Study (TCWS)
- B-On-Time (BOT)
- Top Ten Percent (Top 10%) Scholarship
- College Access Loan (CAL)
- Texas Armed Services Scholarship Program (TASSP)
- Bilingual Education Scholarship Program
- Exemptions
- Waivers

Notes for question 27 (page 2)

- A. Texas College Work-Study is a state program that provides employment positions to eligible students with financial need.
- B. If you have been approved for Deferred Action of Childhood Arrivals (DACA), you could be eligible for the Texas College Work-Study Program. Your college will require proof of your authorization to work in the U.S. (e.g. copy of your SSN card).

Notes for questions 28 and 29 (page 2)

Question 28. Report your marital status as of the date you sign your TASFA (enter married if you are separated but not divorced). If your marital status changes after you sign your TASFA, check with your financial aid office at your institution.

Question 29. Enter the Month and Year of the status selected in question 28. If you have never been married, remarried, separated, divorced or widowed, mark "Not applicable".

STEP TWO: STUDENT DEPENDENCY DETERMINATION

Notes for question 30 (page 2)

If you were born on January 1, 1995, you should enter "no".

Notes for question 35 (page 2)

Enter "Yes" if at any time since you turned age 13:

- You had no living parent (biological or adoptive), even if you are now adopted;
- You were in foster care, even if you are no longer in foster care today; or
- You were a dependent/ward of the court, even if you are no longer a dependent/ward of the court today.

If you are not sure if you were in foster care, check with your state's child welfare agency. You can find that agency's contact information at <u>www.childwelfare.gov/nfcad</u>.

Notes for question 36 (page 2)

Enter **"Yes"** if you can provide a copy of the court's decision that as of today, you are an emancipated minor. Also, enter **"Yes"** if you can provide a copy of a court's decision that you were an emancipated minor or were an emancipated immediately before you reached the age of being an adult in Texas. The court must be located in your state of legal residence at the time the court's decision was made.

Enter **"No"** if you are still a minor and the court decision is no longer in effect or the court decision was not in effect at the time you became an adult. The financial aid administrator at your school may require you to provide additional information such as a copy of the court's decision.

Notes for question 37 (page 2)

The definition of legal guardianship does not include your parents, even if they were appointed by a court to be your guardians. You are also not considered a legal guardian of yourself.

Enter **"Yes"** if you can provide a copy of the court's decision that as of today, you are in legal guardianship. Also, enter **"Yes"** if you can provide a copy of a court's decision that you were in legal guardianship or were in legal guardianship before you reached the age of being an adult in Texas. The court must be located in your state of legal residence at the time the court's decision was made.

Enter **"No"** if you are still a minor and the court's decision is no longer in effect or the court's decision was not in effect at the time you became an adult. The financial aid administrator at your school may require you to provide additional information such as a copy of the court's decision.

Notes for questions 38-40 (page 2)

Enter **"Yes"** if you received a determination at any time on or after July 1, 2017, that you were an unaccompanied youth who was homeless or, at risk for being homeless.

- Homeless means lacking fixed, regular, and adequate housing, which includes living in shelters, motels, or cars, or temporarily living with other people because you had nowhere else to go.
- **Unaccompanied** means you are not living in the physical custody of your parent or guardian.
- Youth means you are 21 years of age or younger or you are still enrolled in high school as of the day you sign this application.
 Answer "No" if you are not homeless or at risk of being homeless, or if you do not have a determination. You should contact your financial aid office for assistance if you do not have a determination but believe you are an unaccompanied youth who is homeless or are an unaccompanied youth providing for your own living expenses who is at risk of being homeless.

STEP THREE: PARENT INFORMATION

Notes for questions 41-56 (page 3)

Question 41. Report your legal parent's marital status as of the date you sign your TASFA (enter married if they are separated but not divorced). If your parent's marital status changes after you sign your TASFA, check with your financial aid office at your institution.

- If your legal parents (biological, adoptive, or as determined by the state [for example, if the parent is listed on the birth certificate]) are not married to each other and live together, select "Unmarried and both parents living together" and provide information about both of them regardless of their gender. Do not include any person who is not married to your parent and who is not a legal or biological parent.
- If your legal parents are married, select "Married or remarried." If you're legal parents are divorced but living together, select "Unmarried and both parents living together." If you're legal parents are separated but living together, select "Married or remarried," not "Divorced or separated."
- If your legal parents are divorced or separated, answer the questions about the parent you lived with more during the past 12 months. (If you did not live with one parent more than the other, give answers about the parent who provided more financial support during the past 12 months or most recent year that you received support from a parent.) For instance, if you feel the support was equal (50/50), list information for the parent that provided at least 51% (slightly more) of your support for the year. If this parent is remarried as of today, answer the questions about that parent and your stepparent.
- If your widowed parent is remarried as of today, answer the questions about that parent and your stepparent.

Question 42. Enter the **Month** and **Year** of your parent's marital status selected in **question 41**. If your parents have never been married, remarried, separated, divorced or widowed, mark "**Not applicable**".

Question 43-46. Enter the all information for Parent 1 and Parent 2 (if applicable).

STEP FOUR: INCOME INFORMATION

PART A. EARNINGS

Notes for question 57 and 58 (page 3) Notes for question 62 and 63 (page 3)

Question 57 and 62. Indicate whether you, your spouse, and/or your parent(s) worked anytime from January 1, 2016 through December 31, 2016.

Question 58 and 63. In order to accurately assess your financial situation, your institution needs to account for all sources of income. In cases where your family's earnings from employment are at or above the IRS filing threshold requirements, the financial aid office will require that you file taxes before processing your TASFA. Tax filing requirements can be found in IRS Publication 17, Table 1-1: Filing Requirements for Most Taxpayers. See https://www.irs.gov/uac/About-Publication-17

Nontax filers: If you (and your spouse) and/or your parent(s) did not meet either of the IRS income filing thresholds, you will not be required to file taxes for state financial aid purposes. However, you will need to provide a breakdown of your living expenses and explain the sources of income that you used to pay for those expenses. (See **PART F. NONTAX FILERS**)

Notes for question 59 and 60 (page 3) Notes for question 64 and 65 (page 3)

Question 59 and 64. Indicate whether you, your spouse, and/or your parent(s) have completed a federal or foreign tax return for 2016. If **"Yes"**, you will be required to submit documents to your financial aid office (e.g. tax returns, tax transcripts, W-2's).

Tax ID Numbers: Enter tax ID numbers for you, your spouse, and/or your parent(s) if they were used to complete the 2016 tax return.

Question 60 and 65. Enter an Individual Taxpayer Identification Number (ITIN) for you, your spouse, and/or your parent(s), if used to file a 2016 tax return.

Note: Mark N/A if an ITIN was not used to file a 2016 tax return.

Notes for question 61 (page 3) Notes for question 66 (page 3)

In general, a person may be considered a dislocated worker if he or she:

- is receiving unemployment benefits due to being laid off or losing a job and is unlikely to return to a previous occupation;
- has been laid off or received a lay-off notice from a job; was self-employed but is now unemployed due to economic conditions or natural disaster; or
- is the spouse of an active duty member of the Armed Forces and has experienced a loss of employment because of relocating due to permanent change in duty station; or
- is the spouse of an active duty member of the Armed Forces and is unemployed or underemployed, and is experiencing difficulty in obtaining or upgrading employment; or
- is a displaced homemaker. A displaced homemaker is generally a person who previously provided unpaid services to the family (e.g., a stay-at-home mom or dad), is no longer supported by the spouse, is unemployed or underemployed, and is having trouble finding or upgrading employment.

PART B. 2016 UNTAXED INCOME

Notes for questions 67-70 (page 4)

Question 67. Report child support that you, your spouse, or your parent(s), as applicable, received for all children during 2016. Do not include foster care or adoption payments.

Question 68. Housing, food, and other living allowances provided to you or your parents must be reported when they are part of a compensation package received for a job. Include cash payments and cash value of benefits. If you received free room and board in 2016 for a job, you must report the value of the room and board as untaxed income. (For this category, "housing allowances" excludes rent subsidies for low-income housing).

Question 69. Do not include student aid, earned income credit, child tax credit, untaxed Social Security benefits, Workforce Investment Act educational benefits, combat pay (if you are not a tax filer), benefits from flexible spending arrangements (e.g. cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.

Question 70. Enter any income that was paid in cash or other means for which a tax return was not filed or a W-2 form was not provided.

PART C. 2016 ADDITIONAL FINANCIAL INFORMATION Notes for questions 72-74 (page 4)

Question 72. Report any child support payments paid by you, your spouse, or your parent(s), as applicable, during 2016 as a result of divorce, separation, or some other legal requirement. These are payments that are made to a child (or children) not living in you or your parent(s) household.

Question 73. Report earnings from need-based work programs and need-based employment portions of fellowships and assistantships.

Question 74. Report any student grant and scholarship aid that was reported to the IRS on you or your parent(s) 2016 federal income tax return. This includes benefits such as awards, living allowances, and interest accrual payments as well as grant and scholarship portions of fellowships and assistantships.

PART D. 2016 ASSETS

Notes for questions 75-77 (page 4)

Question 75. Do not enter student financial aid awards in this amount.

Question 76. Net worth means current value minus debt. If net worth is negative, enter 0.

Question 77. Business and/or investment farm value includes the market value of lands, buildings, machinery, equipment, inventory, etc. Business and/or investment farm debt means only those debts for which the business or investment was used as collateral. Business value does not include the value of a small business if your family owns and controls more than 50% of the business and the business has 100 or fewer full-time or full-time equivalent employees.

For small business value, your family includes:

- Persons directly related to you
- Persons who are or were related to you by marriage, such as a spouse, stepparent, or sister-in-law

Investment farm value does not include the value of a family farm that you, your spouse, and/or your parent(s) live on and operate.

STEP FIVE: HOUSEHOLD INFORMATION

Notes for questions 80-81 (page 5)

Question 80. List the members of your house hold. Include the following:

- Yourself, even if you live with your parents.
- Spouse (if applicable).
- Your children (even if they live outside your home and you will provide more than 50% of their financial support between July 1, 2018 and June 30, 2019).
- Other people that live with you and you will provide more than 50% of their financial support between now and June 30, 2019. Parents (if applicable).
- Your parent's other children (even if they do not live with your parents and your parents will provide more than 50% of their financial support between July 1, 2018 and June 30, 2019).

Note: Do not include people in your household that you will not provide more than half of their support between July 1, 2018 and June 30, 2019 (e.g. roommate).

Question 81. Always count yourself as a college student. Do not include parents, and do not include siblings who are in the U.S. military service academies. You may include others, only if they will attend a program that leads to a college degree or certificate at least half-time in 2018-19.



HOW TO ORDER TRANSCRIPTS

---- 4506-T FORM 4506-T

Request for Transcript of Tax Return

Point eign this form unless all applicable lines have been completed.
 Point eign this form unless all applicable lines have been completed.
 Proposit may be rejected if the form is incomplete or illegible.
 For more information about Form 4006 T, visit serve-in-gev/form4008.

CMIE No. 1545-1872

- Paper form submitted via postal mail •
- Located on IRS website or in the financial aid office
- Will receive in 5-10 business days to address on record
- If transcript is mailed to a 3rd party must include a specific address on line 5

Toll Free Telephone Line

- 1-800-908-9946
- Transcripts will only be mailed
- Will receive in 5-10 business days to address on record

IRS Website

http://www.irs.gov/Individuals/Get-Transcript **Immediate delivery in PDF format** Must have one of the following:

- Credit Card (will not be charged)
- Mortgage or Home Equity Loan
- Home Equity Line of Credit
- Auto Loan
- Mobile Phone account in your name

Transcripts that can be requested online:

- Return Transcript
- Record of Account Transcript
- Account Transcript
- Wage & Income Transcript

Important Information

Walk-Ins 🔨

The IRS office will no longer accept walk-in customers, must make an appointment which takes 4-5 weeks.

Mailed **Transcrints**

5-10 business days to receive a requested transcript by USPS mail.

Third Party requests

Transcripts that are mailed to another party should be requested using the 4506-T form.

IRS Website 💻

Must have a valid credit card. can not use a pre-paid card or debit card.

If your mobile phone can't be verified:

Alternate verification options will be sent and will take additional 5-10 business days.

If you moved since your taxes were filed vou must request transcripts using 4506-T form.

http://www.irs.gov/Individuals/Get-Transcript 1-800-908-9946



HOW TO REGISTER FOR SELECTIVE SERVICE



The easiest and fastest way for a man to register is to register online. Men, age 18 through 25, living in the United States, with a social security number, can register online at:

https://www.sss.gov/Registration/Register-Now/ Registration-Form



If you cannot register online because there is an error with your social security number, or you are an immigrant male, Selective Service "mail-back" registration forms are available at any U.S. Post Office.

A man can fill it out, sign (leaving the space for his Social Security Number blank, if he has not yet obtained one*), affix postage, and mail it to Selective Service, without the involvement of the postal clerk.

Men living overseas may register at any U.S. Embassy or consular office.

*Provide your Social Security Number to the Selective Service when you do obtain one.



More than half the high schools in the nation have a staff member or teacher appointed as a Selective Service Registrar. These individuals help register male high school students.

https://www.sss.gov/

Important Information

ONLINE

Men, age 18 through 25, living in the United States, must have a social security number.

Register online at:

https://www.sss.gov/ Registration/Register-Now/Registration-Form

POST OFFICE ᢣ

Mail your registration form to:

Selective Service System P.O. Box 94739 Palatine, IL 60094-4739

If your Registration Acknowledgement is not received within 90 days, you must contact the Selective Service System at the following Address:

Selective Service System Registration Information Office P.O. Box 94638 Palatine, IL 60094-4638

HIGH SCHOOL 🚊

See your high schools Selective Service Registrar.

1-888-655-1825

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