

Additional Financial Information

2021-22



Section A – Student Information

Student's Last Name _____ Student's First Name _____ M.I. _____ Student ID Number _____

Please write the amount received in **2019** for each of the items in the chart below. Please use **yearly totals**, not monthly amounts. **Do not leave anything blank.** If no income was received from the source listed, write "0".

Section B – Additional Financial Information

	Student Enter an amount or \$0	Parent(s)/Spouse Enter an amount or \$0
Education Credits Include amounts from IRS Form 1040 Schedule 3 — line 3.	\$	\$
Child Support Paid Include child support paid during 2019 due to a divorce, separation or legal requirement. DO NOT include support for children living in your household.	\$	\$
Taxable Earnings from the Federal College Work-Study Program List the name of the college from which you earned Work-Study: _____	\$	\$
Taxable College Grant and Scholarship Aid Reported to the IRS as 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 your adjusted gross income. Don't include untaxed combat pay.	\$	\$
Cooperative Education Program Earnings Offered by a College	\$	\$

Section C – Signatures

The verification process may take SEVERAL WEEKS and your federal financial aid will not be determined until the process is complete. Therefore, we suggest that you submit all information to our office **WITHIN 30 DAYS**. **If any of the sections of this worksheet are left blank or any signatures are missing, this worksheet will be returned to the student for completion, thereby delaying the processing of your financial aid.** Thank you for your cooperation and prompt response.

The information provided on this form is true and complete to the best of my knowledge. I understand that purposely giving false or misleading information may result in fines, penalties, and/or reduction or immediate repayment of aid.

Student's Signature _____

Date ____/____/____

Parent's Signature (if student is dependent) _____

Date ____/____/____

Forms can be submitted ONE of the following ways:

Mail to: Enrollment Services/Financial Aid • NDSCS • 800 6th St N • Wahpeton, ND 58076
Drop off at: 101 Haverty Hall (Wahpeton) OR 183G (NDSCS-Fargo)
Contact Us: 1-800-342-4325 or 701-671-2207