

DOCUMENTS REQUIRED TO PROCESS YOUR 2022-2023 FAFSA



Form E-2 Rev 10/21

EDUCATIONAL OPPORTUNITY CENTER

Please be sure to send all documents required, at the same time, so your FAFSA can be processed in a timely manner. All documents must be filled out, signed, and forwarded to info@projectstay.org. Missing documents will delay the processing of your FAFSA.

DEPENDENT STUDENT

Students born after January 1, 1999 are required to file as Dependent Students and use their parent's 2019 income information on the FAFSA application.

Dependent students will need to provide copies of the following parent's income information:

- Parent(s) **signed** 2020 Tax Returns
- Parent(s) 2020 W-2's
- Child Support by court order received for 2020 (for all children parents support)
- Child Support by verbal agreement
- Child Support paid out

Documentation is required if parent(s) received any of the following benefits for themselves or any member of the household for 2020.

- SSI
- Social Security Benefits
- Veteran's Benefits

STUDENT'S INCOME FOR 2020

If student worked and received an income for 2020, the following documents are required.

- Student's **signed** 2020 Tax Returns
- Student's 2020 W-2's (Even if you did not file a tax return, a copy of the W2 is required to file your FAFSA.)

INDEPENDENT STUDENT

Students born before January 1, 1999 are required to file as Independent Students and use their 2020 income information on the FAFSA application.

Independent students will need to provide the following information:

- A **signed** 2020 Tax Return
- 2020 W-2's
- If you did not work in 2020, the FAFSA requires that you explain how you supported yourself. Additional information may be asked at time the FAFSA is being processed.

Make sure to electronically sign the enrollment form before submitting.

STUDENT IDENTIFICATION

If you have not previously provided our office with the following forms of ID, please include them when you return the enrollment form and income information.

- Drivers License (copy)
- Social Security Card (copy)
- Residency Card (if applicable)

APPLICATION FOR ENROLLMENT

EDUCATIONAL OPPORTUNITY CENTER



Form E-2 Rev 10/21

TO THE APPLICANT: All information requested in the Application for Enrollment Form is required by the U.S. Department of Education and must be completed before services can be provided.

APPLICANT INFORMATION

Social Security Number: _____ - _____ - _____

Applicant Name: Last _____ First _____ Middle _____

Permanent Mailing Address: _____ City/State: _____ Zip Code: _____

Student Ph.: _____ Parent Ph.: _____ Student Email: _____

Date of Birth: Mo. ____ Day ____ Year _____ Age: _____ Gender: Male Female

Are you a U.S. Citizen? Yes No If No, what is your status? _____

Alien Registration Number: A _____ Are you a Veteran? Yes No

Ethnicity: American Indian Asian / Pacific Islander Black / African American
 White / Anglo-American Hispanic / Latino / Mexican American

Applicant's Marital Status: Single / Never Married Married: Mo. ____ Year ____ Spouse's Name: _____
 Divorced: Mo. ____ Year ____ Separated: Mo. ____ Year ____ Widowed: Mo. ____ Year ____

SCHOOL INFORMATION

High School Last Attended: _____ Graduated: Yes No Date: Mo. ____ Year ____

If not a High School Graduate, have you earned a GED certificate? Yes No Date: Mo. ____ Year ____

Have you ever attended college? Yes No Name of College: _____

College Hours Completed: _____ Major: _____

FAMILY INFORMATION: (ALL APPLICANTS)

Number in Family Household: _____ * (List on Back) Parent Email: _____

Parent's Marital Status: Single / Never Married Married: Mo. ____ Year ____ Divorced: Mo. ____ Year ____
 Remarried: Mo. ____ Year ____ Separated: Mo. ____ Year ____ Widowed: Mo. ____ Year ____
 Unmarried / both parents living together

Applicant lives with:
 Both Parents Parent & Stepparent Father Only Mother Only Spouse Other: _____

Biological Father's Name: _____ Does Biological Father have a 4-Year Bachelor's Degree? Yes No

Biological Mother's Name: _____ Does Biological Mother have a 4-Year Bachelor's Degree? Yes No

AUTHORIZATION

I (We) authorize **Project STAY, Inc.**, access to applicant's secondary and postsecondary educational records for the purpose of assisting the student/applicant to complete the required college admission and financial assistance forms and for the follow-up documentation of actual matriculation and financial aid received.

I (We) further agree to provide **Project STAY, Inc.**, with a copy of our most recently filed U.S. Income Tax Return or Non-Taxable Income Verification as a requirement for participation in this program.

Electronically Signed by:

<input type="checkbox"/> Applicant	<input type="checkbox"/> Father/Stepfather	<input type="checkbox"/> Mother/Stepmother	_____	_____
			Father's/Stepfather's Signature	Date
_____			_____	_____
Applicant's Signature			Mother's/Stepmother's Signature	Date
Date				

*** FAMILY HOUSEHOLD: (Only those supported by more than half)**

APPLICANT

Name	Age	Relationship	High School / College Attending
Name	Age	Relationship	High School / College Attending
Name	Age	Relationship	High School / College Attending
Name	Age	Relationship	High School / College Attending
Name	Age	Relationship	High School / College Attending
Name	Age	Relationship	High School / College Attending
Name	Age	Relationship	High School / College Attending
Name	Age	Relationship	High School / College Attending
Name	Age	Relationship	High School / College Attending
Name	Age	Relationship	High School / College Attending

OFFICE USE ONLY

Student's FSA ID: Password:

College User Name: Password:

Mom's/Dad's FSA ID: Password:

A. Academic Status:

- High School Grade: _____ High School Graduate GED GED Pending
- Currently Enrolled In College Returning To College Postsecondary Transfer

B. Anticipated Enrollment: Fall: _____ Spring: _____ Summer: _____

C. Income Verification: Social Security: \$ _____ State Aid (TANF): \$ _____

Veteran's Benefits: \$ _____ Child Support: \$ _____ IRS: \$ _____

Non-Filer Income: \$ _____

D. Income Data: Taxable Income: \$ _____ Household Size: _____ IRS Exemptions: _____

Income Year: _____

E. Participant Eligibility: LIFG LI FG Other

Advisor Date

File Reviewed for Eligibility Criteria by Date



INFORMATION SHEET 2022-2023 FAFSA



Form E-3
Rev 10/21

STUDENT'S NAME: Last Name: _____ First: _____ Middle: _____

STUDENT

- 1) What is the student's dependency status? (select one) INDEPENDENT DEPENDENT
- 2) Which college degree plan will you pursue? (select one) Bachelor's Degree Associate Degree Certificate
- 3) Major _____

BIRTH OR ADOPTIVE PARENTS' EDUCATION

- 4) Highest level of education completed by Parent 1 (Father) (select one):
 Middle / Junior High High School / GED 4-Year College Degree (Bachelor's) or Beyond Other / Unknown
- 5) Highest level of education completed by Parent 2 (Mother) (select one):
 Middle / Junior High High School / GED 4-Year College Degree (Bachelor's) or Beyond Other / Unknown

STUDENT'S STATE OF RESIDENCE

- 6) In which state do you live? _____
- 7) Did you become a resident of this state before January 1, 2017? YES NO

ALL SOURCES OF STUDENT'S / SPOUSE'S INCOME

- 8) Did anyone in your household receive any of the following in 2020? (select all that apply). If none, check here
 Supplemental Security Income (SSI) Food Stamps (SNAP) WIC
 Medicaid Free/Reduced Price Lunch TANF
- 9) Untaxed Income:
 Education Credits \$ _____ Child Support \$ _____
 Tax-Deferred Pensions \$ _____ Worker's Compensation \$ _____
 Money Received or Paid \$ _____ Other Income \$ _____

OTHER QUESTIONS FOR STUDENT / SPOUSE

- 10) Did either student / spouse pay child support for a child or children who did not live with you in 2019?
 YES NO If yes, how much did you pay in 2020? \$ _____
- 11) As of today, is the student / spouse a dislocated worker? (Has either been laid off; received a lay-off notice; receiving unemployment benefits and is unlikely to return to their previous occupation) YES NO

STUDENT'S ASSETS

- 12) As of today, what are the student's / spouse's cash, checking and / or savings account balances? \$ _____
- 13) As of today, what is the net worth of the student's / spouse's investments (stocks, bonds and real estate).
Do not include the value of your home, retirement funds, or vehicles. \$ _____
- 14) As of today, what is the net worth of student's / spouse's current businesses and / or investment farms? \$ _____

DEPENDENT STUDENT: PARENTS' DATES OF BIRTH

- 15) Parent 1 (father / mother / stepparent) Date of Birth: Mo.: _____ Day: _____ Year: _____ (If student lives in a single parent household, only that parent's date of birth is required.)
- 16) Parent 2 (father /mother / stepparent) Date of Birth: Mo.: _____ Day: _____ Year: _____

DEPENDENT STUDENT: PARENTS' / ADOPTIVE / STEPPARENTS' STATE OF RESIDENCE

- 17) In which state do the parents /stepparents live? _____
- 18) Did the parents / stepparents become residents of this state before January 1, 2017? YES NO

DEPENDENT STUDENT: ALL SOURCES OF PARENTS' / ADOPTIVE / STEPPARENTS' INCOME

- 19) Have **or** will the parents / adoptive / stepparents file a **2020 Income Tax Return**? YES NO
(If yes, a **signed** copy **must be provided**; if no, a notarized statement may be required)
- 20) Did anyone in your household receive any of the following in 2020? (select all that apply) If none, check here
- Supplemental Security Income (SSI) Food Stamps (SNAP) WIC
- Medicaid Free/Reduced Price Lunch TANF
- 21) Untaxed Income
- | | | | |
|-------------------------------------------------|----------|------------------------------------------------|----------|
| <input type="checkbox"/> Education Credits | \$ _____ | <input type="checkbox"/> Child Support | \$ _____ |
| <input type="checkbox"/> Tax-Deferred Pensions | \$ _____ | <input type="checkbox"/> Worker's Compensation | \$ _____ |
| <input type="checkbox"/> Money Received or Paid | \$ _____ | <input type="checkbox"/> Other Income | \$ _____ |

DEPENDENT STUDENT: OTHER QUESTIONS FOR PARENTS / ADOPTIVE / STEPPARENTS

- 22) Did either parent / adoptive / stepparent pay child support for a child or children who did not live with you in 2020?
 YES NO If yes, how much did you pay in 2020? \$ _____ (You must provide documentation)
- 23) As of today, is either parent / adoptive / stepparent a dislocated worker? (Has the parent been laid off; received a layoff notice; receiving unemployment benefits and is unlikely to return to their previous occupation) YES NO

DEPENDENT STUDENT: PARENTS' / ADOPTIVE / STEPPARENTS' ASSETS

- 24) As of today, what are the parents' / adoptive /stepparents' cash, checking and /or savings account balances? \$ _____
- 25) As of today, what is the net worth of the parents' / adoptive /stepparents' investments (stocks, bonds and real estate).
Do not include the value of your home, retirement funds, or vehicles. \$ _____
- 26) As of today, if applicable, what is the net worth of the parents' / adoptive /stepparents' business — if the business employs 100 or more employees? (Business value includes market value of land, buildings, machinery, equipment, inventory, etc.
Do **not** include a farm that you live on and operate.) \$ _____

COLLEGES TO RECEIVE INFORMATION

- 27) List the names of the **colleges to which you have applied** and you want to receive your FAFSA information:
_____ With Parent /On Campus /Off Campus _____ With Parent /On Campus /Off Campus

"I, _____, certify that the information provided is true and accurate and I understand that all information submitted on the FAFSA is cross-referenced with other federal agencies."

Electronically Signed by:

- Applicant Father/Stepfather Mother/Stepmother

Applicant's Signature _____

DATE: Mo.: _____ Day: _____ Year: _____