



**SECTION B: TAX FILER INFORMATION**

FOR THE STUDENT

Tax returns include the Federal 2016 IRS Form 1040, 1040A, 1040EZ, a tax return from Puerto Rico or a foreign income tax return.

- Check here if you will **not** file and are **not** required to file a 2016 U.S. Income Tax Return. List amount earned here \_\_\_\_\_. Please send in a copy of all 2016 W-2 forms if available.
- Check here if you have filed, and had your tax documents imported from the IRS website directly.

Tax returns include the Federal 2016 IRS Form 1040, 1040A, 1040EZ, a tax return from Puerto Rico or a foreign income tax return.

- Parent/Spouse will not and is not required to file a 2016 Income Tax Return. List the amount earned here \_\_\_\_\_. Please send in a copy of all 2016 W-2 forms if available.
- Parent/Spouse was required to file a 2016 income tax return. Attach all IRS tax transcript(s) if the IRS Database match was not used on the FAFSA.

**SECTION C: FOOD STAMPS—SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)**

Please confirm the following for anyone who is living in your household. (Please respond to either the dependent questions or the independent questions – not both)

- DEPENDENTS:* My parents received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) any time during the 2016 calendar year.
- DEPENDENTS:* My parents **DID NOT** receive SNAP benefits during the 2016 calendar year.
- INDEPENDENTS:* My spouse or I received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) any time during the 2016 calendar year.
- INDEPENDENTS:* My spouse or I **DID NOT** receive SNAP benefits during the 2016 calendar year.

**\*\*If anyone in your household did receive SNAP benefits (food stamps), please supply documentation from the agency that issues SNAP benefits.**

**SECTION D: CHILD SUPPORT PAID**

Please confirm the following for anyone who is living in your household. (Please respond to either the dependent questions or the independent questions – not both)

(Dependents should include information about parents and anyone supported by and living in your parent’s household.)

- DEPENDENTS:* My parents paid child support during the 2016 calendar year (Complete the chart below).
- DEPENDENTS:* My parents **DID NOT** pay child support during the 2016 calendar year (Skip to Section E).

(Independents should include information about their spouse and any children they support.)

- INDEPENDENTS:* My spouse or I paid child support during the 2016 calendar year (Complete the chart below).
- INDEPENDENTS:* My spouse or I **DID NOT** pay child support during the 2016 calendar year (Skip to Section E).

Name of Person Who <u>Paid</u> Child Support	Name of Person to Whom Child Support was <u>Paid</u>	Name of Child for Whom Child Support was <u>Paid</u>	Amount of Child Support <u>Paid</u> in 2016
			\$
			\$
			\$

**SECTION E: HIGH SCHOOL COMPLETION STATUS - STUDENT**

Please select whichever item describes you:

- I **DID** graduate from high school and have a high school diploma.
- I **DID** receive a GED.
- I **DID** graduate from a home school program.
- I **DID NOT** receive a high school diploma or its equivalent from any of the above sources.

**\*\*If you graduated from high school, home school program or received a GED, please submit official documentation in support of your statement.**

**SECTION E: IDENTITY/STATEMENT OF EDUCATIONAL PURPOSE (To be completed in front of a Financial Aid Representative or Notary Public)**

**IMPORTANT:** Please read and sign the Statement of Educational Purpose below indicating that the statement and all other information contained on this worksheet is true and correct. **WARNING!** If you purposely give false or misleading information to help establish eligibility for federal student aid, you may be subject to a \$20,000 fine, a prison sentence, or both. By signing this statement, you certify that all the information reported in support of the student’s application for financial aid is complete and accurate.

**STATEMENT OF EDUCATIONAL PURPOSE**

I certify that I (print your name) \_\_\_\_\_ am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Tabor College for 2018-2019.

I also certify that I: (check to indicate you have read and understand each statement):

- Am not in default on a federal student loan or have made satisfactory arrangements to repay it,
- Do not owe money back on a federal student grant or have made satisfactory arrangements to repay it,
- Will notify Tabor College if I default on a federal student loan AND
- Will not receive a Federal Pell Grant from more than one college for the same period of time.

**SIGNATURE(S)**

By signing this worksheet, I (we) certify that all the information reported to qualify for federal student aid is complete and correct. At least one parent must sign if you are a dependent student.

Student	Date	Parent (or Spouse)	Date
---------	------	--------------------	------

**\*DIRECTIONS FOR SUBMISSION OF THIS FORM (Please read carefully): Present this form in person in the Tabor College Office of Financial Aid along with valid, government-issued photo identification (i.e. driver’s license, state issued photo identification, military identification, or passport). If presenting this document at Tabor College, we will maintain a copy of the photo identification with the date received and name of official authorized to collect the student ID.**

**NOTARY’S CERTIFICATE OF ACKNOWLEDGEMENT (for those unable to appear in person)**

State of \_\_\_\_\_, City/County of \_\_\_\_\_

On this date of \_\_\_\_\_, before me (notary’s name), \_\_\_\_\_,

Personally appeared (name of person signing this form) \_\_\_\_\_,

And provided to me on basis of satisfactory evidence of identification (type of government-issued photo ID provided) \_\_\_\_\_ to be the above named person who signed the foregoing instrument.

WITNESS my hand and official seal (signature) \_\_\_\_\_

My commission expires on (date) \_\_\_\_\_.

Notary publics can typically be found at banking institutions and county government offices such as your local County Clerk.

*You should make a copy of this worksheet for your records.*

**Do not mail this worksheet to the Department of Education.**

Please Return to: Tabor College  
Attn: Financial Aid  
400 S Jefferson, Hillsboro, KS 67063-1799  
Phone: (620) 947-3121 Ext. 1729 Fax (620) 947-6276