# SUNY ONEONTA 2017 ACE FINANCIAL INFORMATION FORM

The information you provide will be used in the review of your eligibility for the Access to College Excellence program. It is to your advantage to provide as much information as possible. You may type and save your answers on this form. Once it is complete, print, sign and mail a copy of the completed form **with required documents** to: SUNY Oneonta, Office of Admissions, 108 Ravine Parkway, Oneonta, NY 13820.

#### **Section 1. Personal Information**

Name: Address:	High School CEEB Code:
Date of Birth:	Entry Term: Date:
U.S. Citizen: Yes No	If no, permanent resident: Yes No
Section 2. Exceptions to Income (	Guidelines

Answer **all** of the questions below to help determine if you qualify for exclusion from the income eligibility guidelines.

Are you or your family primarily dependent on public assistance payments from Tem	po	rary	
Assistance to Needy Families (i.e. Family Assistance, Safety Net)?		Yes	Γ

Are you in foster care and neither your foster parents nor your natural parents provid		
college?	Yes	No

No

No

No

No

No

No

Yes

Yes

Yes

Yes

Yes

Are you a ward of the state or county?

If you answered "Yes" to either of the last two questions above, skip to Section 8. All others, continue to Section 3.

**Section 3. Dependency Status** 

Answer **all** of the questions below to help determine your dependency status.

Will you be 24 years of age by December 31, 2017?

Are you married? (Answer "yes" if you are separated, but not divorced.)

Are you currently serving on active duty in the U.S. Armed Forces?

Are you a veteran of the U.S. Armed Forces?

Do you have legal dependents (other than a spouse) who receive more than half of their support from you?

At any time since you turned age 13, were both your parents deceased, were you in foster care or were you a dependent or ward of the court?
Were you or are you an emancipated minor, as determined by a court?
Were you or are you in legal guardianship, as determined by a court?
At any time on or after July 1, 2016, were you determined to be an unaccompanied youth who is homeless or to be self-supporting and at risk of being homeless?
If you answered "No" to all of the questions above, your status is "Dependent" for the purposes of this form. Continue to Section 4.
If you answered <b>"Yes"</b> to <b>any</b> of the questions above, your status is <b>"Independent"</b> for the purposes of this form. Skip to Section 5.
Section 4. Parent Information – FOR DEPENDENT STUDENTS ONLY
Dependent students ${f must}$ complete this section. Independent students should leave this section blank.
blank. What is the current marital status of your parents? Married Single/Never Married
blank.
blank. What is the current marital status of your parents? Married Single/Never Married Widowed Widowed
blank. What is the current marital status of your parents? Married Divorced/Separated Widowed Date of Marital Status (mm/yyyy):

Name	Age	Relationship	Employment Status	Annual Pay before Taxes	Will file a 2016 federal tax return?	Dependent on the same income that supports you?

Section 6. Additional Household Income	
Report all additional income received in your household for the ta	ax year <u>2016</u> .
Dividends, interest, rents or other income from investments:	\$
Social Services/Public Assistance (TANF, etc):	\$
Social Security benefits:	\$
Supplemental Security Income (SSI):	\$
Workers Compensation/Disability:	\$
Pension/Annuity:	\$
Unemployment:	\$
Alimony/Maintenance:	\$
Child Support:	\$
Other income (specify):	\$

## Section 7. Household Assets

Report the current value of the following assets held by your household. Independent students are not required to report information regarding assets held by parents.

Your cash, checking and savings accounts:	\$
Your investments (non-retirement):	\$
Spouse's cash, checking and savings accounts:	\$
Spouse's investments (non-retirement):	\$
First Parent or Stepparent's cash, checking and savings accounts:	\$
First Parent or Stepparent's investments (non-retirement):	\$
Second Parent or Stepparent's cash, checking and savings accounts:	\$
Second Parent or Stepparent's investments (non-retirement):	\$

	Purchase Year	Purchase Price	Current Debt
Business or farm		\$	\$
owned by you, your			
spouse or your			
parents:		\$	\$
Home owned by you, your spouse or your		Φ	φ
parents:			
Other real estate		\$	\$
owned by you, your			
spouse or your			
parents:			
Section 8. Academic Ba	ekaround		
Please indicate if you cu	urrently participate in al	ny of following programs	<u>s:</u>
Educational Opportun	ity Center (EOC)	EAR-UP Talent Sea	arch 🔲 Upward Bound
Early College, M	iddle College or Gateway	to College	Liberty Partnership
Indicate the highest leve	el of education attained	by First Parent:	
Less than a high scho	ool diploma 🗌 High sc	hool diploma (or equivale	nt)
Some college, no c	degree 🔲 Associate de	gree 🔲 Bachelor's deg	ree or higher
Indicate the highest leve	el of education attained	by Second Parent:	
Less than a high scho	ool diploma 🗌 High sc	hool diploma (or equivale	nt)
Some college, no c	degree 🔄 Associate de	gree 🔄 Bachelor's deg	ree or higher
Section 9. Personal Essa	av		
Applicants to the ACE pro	ogram at SUNY Oneonta	are required to submit a F	ersonal Essay. Please
provide a response to the following questions (up to 500 words) to help us better understand your			
interest in ACE. Attach yo	our response to this form.	Be sure to include your n	ame on the attachment.
1.) What motivated your interest to pursue post-secondary education?			
2.) Explain the circumstar	nces that affected your ac	ademic performance in hi	gh school.
3.) Based on what you kn	ow about the Access to C	College Excellence Progra	ım, how do you think the
program will benefit you?			

Section 10. Certification

I understand that I must be academically and economically eligible for ACE and that I must provide required documentation with this form to prove my eligibility. I understand that I am required to file the 2018-19 Free Application for Federal Student Aid (FAFSA) as soon as possible after October 1, 2017. I understand that additional paperwork may also be required. All information submitted is true to the best of my knowledge. I understand that knowingly falsifying or omitting data may result in the denial of admission or dismissal.

Applicant Signature:	Date:
First Parent or Stepparent's Signature:	Date:
Second Parent or Stepparent's Signature:	Date:

### **Required Financial Documentation**

You must attach the following documents for the tax year <u>**2016**</u> to verify the information reported. Please do not return this form until the required documents are available.

If you reported:	You must attach:
No income	•IRS Form 4506-T (Request for
	Transcript of Tax
	Return, Verification of Non-Filing)
Income from wages, tips,	• IRS forms 1040, 1040A, 1040EZ,
dividends, interest, rental,	signed copies of
business profits	1040TEL or official transcript of tax
	returns; and
Income from dischility	• Forms W-2, 1099, W9
Income from disability benefits, a pension, annuity,	<ul> <li>Letter from the appropriate institution stating applicable year's</li> </ul>
or unemployment benefits	total award (if not already reported
	on a tax return)
	Disabilities Statement
Child support, maintenance or	Signed affidavit, court order or
alimony	legal document
	indicating amount of child support
	and/or alimony
Public Assistance	A signed letter from the agency
	stating applicable
	year's total award and names of
	recipients
Social Security, Supplemental	SSA Form 1099 or letter from the
Security Income or Veteran's	agency
Administration non-	stating applicable year's total
educational benefits	award for each member of the
	household including names of
	individuals
You are a ward of the court,	Letter or court document from the
foster child or orphan	government, courts,
	private agency responsible for your
	support
<u> </u>	

You are a U.S. Veteran	Form DD214	
You are a non-U.S. citizen and a permanent resident	<ul> <li>Form I-551 (Alien Registration Card)</li> </ul>	
You or your family owns a business	IRS Form 1040 Schedule C	
Unusual circumstances	<ul> <li>Notarized letters, statements, death certificates, etc. that corroborate claims</li> </ul>	

## **Mailing Instructions**

Mail your completed SUNY ACE Financial Information Form together with required documents to: SUNY Oneonta, Office of Admissions, 108 Ravine Parkway, Oneonta, NY 13820. Your completed form must include the following:

- This SUNY ACE Financial Information Form
- Your required financial documentation (see above)
- Your Personal Essay, if required (see Section 9)