

# 2015–2016 Texas Application for State Financial Aid (TASFA)

**For House Bill 1403/Senate Bill 1528 students only:** House Bill 1403 from the 2001 State Legislative Session/Senate Bill 1528 from the 2005 State Legislative Session allows certain categories of foreign-born and immigrant students in the State of Texas to qualify for residency under Texas Education Code Chapter 54, Section 54.052(a)(3). This state law allows such students to pay the resident tuition rate while attending public institutions of higher education in Texas, and be classified as state residents for tuition purposes. As Texas residents, such students are eligible to apply for some student financial aid programs offered by the State of Texas.

Name

Street address

City

State

ZIP code

Telephone

Email address

Date of birth (MM/DD/YYYY)

College Student ID#









High School (where you received or will receive your high school diploma):

High School City:

Date of Graduation:

<p>Grade Level beginning in 2015-2016:</p> <input type="checkbox"/> Never attended college and 1st year undergraduate <input type="checkbox"/> Attended college before and 1st year undergraduate <input type="checkbox"/> 2nd year undergraduate/sophomore <input type="checkbox"/> 3rd year undergraduate/junior <input type="checkbox"/> 4th year undergraduate/senior <input type="checkbox"/> 5th year/other undergraduate <input type="checkbox"/> 1st year graduate/professional <input type="checkbox"/> Continuing graduate/professional or beyond	<p>Degree or certificate I am seeking:</p> <input type="checkbox"/> 1st bachelor's degree <input type="checkbox"/> 2nd bachelor's degree <input type="checkbox"/> Associate degree <input type="checkbox"/> Certificate or diploma <input type="checkbox"/> Teaching credential (non-degree program) <input type="checkbox"/> Graduate or professional degree <input type="checkbox"/> Other/Undecided
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## Section I: Student Information


- Were you born before January 1, 1992?   Yes  No
- As of today, are you married?   Yes  No
- Are you in a graduate program of study? (e.g., master's or doctoral program)   Yes  No
- Do you have at least one child that you support?   Yes  No
- Do you have dependents other than your children or spouse that you support?   Yes  No
- Are you an orphan or ward of the court?   Yes  No
- Are you or were you an emancipated minor as determined by the state's court?  Yes  No
- Are you or were you in legal guardianship as determined by the state's court?   Yes  No
- Did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless?   Yes  No
- Did the director of an emergency shelter program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless?  Yes  No
- Did the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless?  Yes  No

For purposes of this application, if you answered **"No" to all of the questions above**, you are considered a **dependent student** and must include parental income information on this form.

If you answered **"Yes" to any of the questions above**, you are considered an **independent student** and are not required to include parental income information on this form. An **independent student** who is married must include information about his or her spouse.

Print full name here:









## Section II: Household Information

12. If you are a **dependent student**, please list the names of ALL family members, including your parent(s), who will be supported by your parent(s) from **July 1, 2015 to June 30, 2016**. If you are an **independent student**, you should include family members who are supported by you. (See instructions for additional information.) Attach additional sheets if necessary. 





Names [Include parent(s) and sibling(s), or spouse (if applicable)]	Age	Relationship to student	Which college/university will student be attending?
		Self	
<b>Total number in household:</b>		<b>Total number in college in 2015–2016:</b>	

## Section III: Additional Information

### Student:

13. Independent students only:  
As of today, are you or your spouse a dislocated worker?   
 Yes  No  Don't know
14. Did you work in 2014?  Yes  No  
 If Yes, did you file a U.S federal (or foreign) income tax return for 2014?  
 Yes (Attach tax return and tax transcript)   
 No  Will file
15. What is your marital status?   
 Single  Divorced/Widowed  
 Married/Remarried  Separated
16. Have you been convicted of a felony or a crime involving a controlled substance?   
 Yes  No
17. Do you have authorization (e.g. DACA) to work in the U.S.?   
 Yes Enter SSN: \_\_\_\_\_  No
18. Housing plans for 2015–2016: Where do you plan to live?   
 On campus  
 Off campus  
 Commuter/With parent or relative
19. At the start of the 2015–2016 school year, you will enroll:   
 Full time  Less than 1/2 time  
 3/4 time  Not sure  
 1/2 time
20. Have you received funds from either of the following grant programs while attending a prior institution?   
 a. TEXAS Grant Program  Yes  No  
 b. Top 10% Scholarship Program  Yes  No  
 c. If you are transferring from a prior institution, did you earn an Associate Degree?  
 Yes (Enter date earned the Associate Degree \_\_\_/\_\_\_/\_\_\_)  
 No  N/A (not applicable)

### Parent:

21. Did your parents work in 2014?  Yes  No   
 If Yes, did they file a U.S federal (or foreign) income tax return for 2014?  
 Yes (Attach tax return and tax transcript)  
 No  Will file
22. Is either of your parents a dislocated worker?   
 Yes  No
23. What is your parent's marital status?   
 Married/Remarried  Widowed  
 Never married  Separated/Divorced  
 Unmarried and both parents living together
24. Mother/Stepmother's highest level of education completed   
 Middle school/Jr. high  High school  
 College or beyond  Other/unknown
25. Enter your mother's/stepmother's age:   
 Date of birth:
26. Father/Stepfather's highest level of education completed  
 Middle school/Jr. high  High school  
 College or beyond  Other/unknown
27. Enter your father's/stepfather's age:   
 Date of birth:

## Section IV: Income and Assets

Do not leave any blanks. Enter "0" where appropriate.

**Dependent students:** Complete both the *Student and Parent(s)* columns.

**Independent students:** Complete the *Student/Spouse* column only.

	Student/Spouse		Parent(s)	
	Student	Spouse	Mother	Father
<b>Part A. Annual Untaxed Income</b>				
28. Child support received ?	\$		\$	
29. Tax exempt interest income ?	\$		\$	
30. Housing, food, and other living allowances paid on your behalf ?	\$		\$	
31. Other untaxed income not reported, such as worker's compensation, disability, etc. ?				
32. Money you received (or bills someone else paid for you) not reported elsewhere on this form ?	\$			
33. Cash earnings (wages not listed on taxes or W-2 forms) ?	Student	Spouse	Mother	Father
	\$	\$	\$	\$
<b>Total Untaxed Income</b>	\$		\$	
<b>Part B. Annual Income Exclusions</b>				
34. Child support paid ?	\$		\$	
35. Taxable earnings from work-study or other need-based work programs	\$		\$	
36. Taxable scholarships and grants reported on 2014 federal income tax return ?	\$		\$	
<b>Part C. Assets</b>				
37. As of today, balance of cash, savings, and checking accounts ?	\$		\$	
38. As of today, investment net worth (do not include the home you live in or the balance of retirement plans) ?	\$		\$	
39. As of today, net worth of current business(es) or investment farm(s) ?	\$		\$	

## Section V: Total Family Income

40. Was your TOTAL FAMILY INCOME **less than \$7,000 in 2014**?

(TOTAL FAMILY INCOME is the income reported on your parent's and your W-2 IRS tax forms **plus** the Total Untaxed Income reported on Section IV, Part A of this form for you and your parent(s)) ?

Yes       No

**If YES**, please include a breakdown of your living expenses (e.g., rent, food, utilities, etc.) and provide a written summary that explains how you were able to pay for your living expenses in 2014. Attach additional sheet(s) if necessary.

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Print full name here:

## Section VI: Statement of Selective Service Registration Status

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41. Certification of registration status (Please check the appropriate box.) 

- I certify that I am female and, therefore, not required to register with the Selective Service System.
- I certify that I am a male age 18 to 25 and am registered with the Selective Service System.

**Please attach copy of registration acknowledgement card.**

- I certify that I am not of an age required to register with Selective Service System. (That is, I am over 25.)
- I certify that I have been determined by the Selective Service System to be exempt from registration.
- I certify that I have not reached my 18th birthday and understand that I will be required by law to register at that time.
- I certify that I do not have a Social Security Number, but have submitted my Selective Service registration form to the Selective Service System and will provide proof of registration to the financial aid office as soon as I receive my registration number.

## Section VII: Signatures

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42. a. **Student and Parent signatures** 

I understand that under Texas Education Code, Section 51.9095, I must be registered with the Selective Service System according to the requirements of federal law in order to receive student financial aid funds from the State of Texas, and hereby certify that I meet this requirement. I also 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 \_\_\_\_\_

(\*Parent signature required only for dependent students)

**b. High School Counselor: Not required if parent signature already provided above.**

High school counselor signature \_\_\_\_\_

Date \_\_\_\_\_

Printed name \_\_\_\_\_

Title \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP code \_\_\_\_\_

Telephone \_\_\_\_\_

Email address \_\_\_\_\_

Print full name here: \_\_\_\_\_