

## Need-Based Aid Application for Students Entering in 2020-2021

To apply for need-based financial aid, **complete the 2020-2021 Free Application for Federal Student Aid (FAFSA) online at [www.FAFSA.gov](http://www.FAFSA.gov) as soon after October 1, 2019 as you can and list Wooster's federal school code 003037.** We cannot determine aid eligibility without your FAFSA data from the federal processor. **This form is not required unless requested by the Financial Aid Office.**

Student Name \_\_\_\_\_ SSN or Wooster ID \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ *Street* \_\_\_\_\_ *City* \_\_\_\_\_ *ST* \_\_\_\_\_ *Zip* \_\_\_\_\_  
 Student email \_\_\_\_\_ Parent email \_\_\_\_\_

Parent 1 Occupation \_\_\_\_\_ Parent 2 Occupation \_\_\_\_\_

### FAMILY/PARENTAL INFORMATION

In the chart below include:

- Yourself
- Your parent(s) (including step-parent); do not include your non-custodial parent
- Your parents' other dependent children if your parent(s) will provide more than half of their support from July 1, 2020 through June 30, 2021
- Other people only if they live with your parent(s) and your parent(s) will provide more than half of their support from July 1, 2020 through June 30, 2021
- College information for those students attending at least half-time or more during 2020-2021 in a program leading to a degree, diploma, or certificate [full time: F/T; half time: H/T]
- Please add lines for other family members, if necessary

Full Name	Date of Birth	Relationship to student	School/College in 2020-2021	Grade Level in 2020-2021*	F/T H/T
1. student:		Yourself	Wooster		
2.					
3.					
4.					
5.					
6.					
7.					

\*Codes for Grade Level past high school:

0 = 1<sup>st</sup> year/never attended  
 1 = 1<sup>st</sup> year/attended

2 = 2<sup>nd</sup> year/sophomore  
 3 = 3<sup>rd</sup> year/junior

4 = 4<sup>th</sup> year/senior  
 5 = 5<sup>th</sup> year/undergrad

6 = 1<sup>st</sup> year grad/prof school  
 7 = Continuing grad/prof school

**FAMILY INCOME/EXPENSE INFORMATION**

We recommend both the student and the parents (if 2018 tax returns were filed) to complete the IRS data retrieval tool process on the FAFSA.

- 2020-2021 employer tuition assistance for any family member. Explain in comment section. \$ \_\_\_\_\_
- 2018 child support received for all children \$ \_\_\_\_\_
- 2018 housing, food and other living expenses paid to members of the military, clergy, and others \$ \_\_\_\_\_

**NON-CUSTODIAL PARENT'S INFORMATION**

Complete this section unless both of your natural (or adoptive) parents are listed in the family grid on previous page. If the parent is deceased, check here and leave the section blank. **Incomplete information in this section may delay the processing of your financial aid package.**

Month/Year of: separation \_\_\_\_\_ or divorce \_\_\_\_\_ If they are not separated or divorced, please explain in the comment section below.

Other parent's name \_\_\_\_\_ His/her annual child support for you \$ \_\_\_\_\_

Home address \_\_\_\_\_ When will the annual child support for you end? \_\_\_\_\_

Occupation \_\_\_\_\_ How much does he/she expect to contribute towards your educational costs in 2020-2021: \$ \_\_\_\_\_

His/her 2018 adjusted gross income \_\_\_\_\_ Is there a legal agreement specifying this amount? \_\_\_\_\_

Who claimed you as a tax exemption for 2018? \_\_\_\_\_ Who will claim you for 2019? \_\_\_\_\_

**COMMENTS**

Please note any special concerns you would like to bring to our attention as we review your aid eligibility. List any colleges you attended and your dates of attendance. List all outside scholarships and amounts you expect to receive. Note also if you do not intend to live on campus.

**SIGNATURES**

***THIS FORM WILL NOT BE ACCEPTED WITHOUT THE STUDENT AND AT LEAST ONE PARENT SIGNATURE.***

All of the information on this form is true and complete to the best of our knowledge. We agree to provide documentation for this information, which may include a copy of U.S. income tax returns for the student and parents. The student may not receive aid if we do not provide proof when asked. We agree that if the student receives an endowed scholarship, the College may release information about his/her academic accomplishments and goals, extracurricular activities, and eligibility for the given scholarship.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Step-parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Step-parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**RETURN THIS FORM TO:**

**FINANCIAL AID, THE COLLEGE OF WOOSTER, 1189 BEALL AVENUE, WOOSTER, OH 44691**

**Fax Number: 330-263-2634 Email: financialaid@wooster.edu**

***NOTICE OF NONDISCRIMINATORY POLICY***

*The College of Wooster does not discriminate on the basis of age, sex, race, creed, national origin, disability, handicap, sexual orientation, or political affiliation in the admission of students, or their participation in College educational programs, activities, financial aid, or employment.*