



EMMANUEL COLLEGE

2011-2012 Application for Financial Aid Freshman and Transfer Student

PRIORITY FILING DATE
March 1, 2011

To apply for need-based financial aid at Emmanuel College, please complete:

- All sections of this form, including signatures. Incomplete forms will not be processed.
- The 2011-2012 FAFSA (www.fafsa.gov). The Emmanuel College Federal School Code is 002147.

I. Student Information

Last Name	First Name	Middle Initial	Date of Birth	Social Security Number
Address	City	State	Zip Code	
Home Phone Number	Cell Phone Number	E-mail Address		

Citizenship: U.S. Citizen Eligible Non-Citizen: Alien Registration # International Student

In 2011-2012, year of program: 1st 2nd 3rd 4th

Anticipated Graduation Date:
Month Year

Housing Status: On-Campus With Parents/Relative Off-Campus

II. Sources of Outside Aid

Report all expected outside sources of financial assistance for the 2011-2012 academic year.

	Source of Outside Aid	Amount	
Anticipated 529 or U.Plan Disbursements	Name of Plan	\$	
Anticipated State Scholarships/Grants	Name of State Scholarships/Grants	\$	
Private Scholarships Please provide scholarship notification, if available. Attach an additional sheet, if receiving more than three private scholarships.	1) Private Scholarship	Fall Amount	Spring Amount
	2) Private Scholarship	Fall Amount	Spring Amount
	3) Private Scholarship	Fall Amount	Spring Amount
Tuition Reimbursement (from student's or parent's employer)	Employer	\$	
Veterans' Benefits		\$ per month for months	Amount # of months during 2011-2012
Other Sources or Benefits	Source of Benefit	\$	

III. FAFSA Verification Information

A. Family Size

If you are a **dependent student** required to provide parents' information on the FAFSA, please list:

- Yourself
- Your custodial parent(s), including stepparent (even if you do not live with your parents)
- Your parents' other children (if your parents will provide more than 50% of their support)
- Other people who live with and receive more than 50% of their financial support from your parents and will continue to receive this support through June 30, 2012

If you are an **independent student** not required to provide parents' information on the FAFSA, please list:

- Yourself
- Your spouse
- Your children (if they receive more than 50% of their financial support from you)
- Other people who live with and receive more than 50% of their financial support from you and will continue to receive this support through June 30, 2012

Name	Relationship	Age	2011-2012 College Enrollment
1. You	Self		<input type="radio"/> Half-time or greater at Emmanuel College <input type="radio"/> Less than half-time at Emmanuel College
2.	Parent		<input type="radio"/> Half-time or greater at Name of College/University <input type="radio"/> Less than half-time at Name of College/University <input type="radio"/> Will not be attending college
3.			<input type="radio"/> Half-time or greater at Name of College/University <input type="radio"/> Less than half-time at Name of College/University <input type="radio"/> Will not be attending college
4.			<input type="radio"/> Half-time or greater at Name of College/University <input type="radio"/> Less than half-time at Name of College/University <input type="radio"/> Will not be attending college
5.			<input type="radio"/> Half-time or greater at Name of College/University <input type="radio"/> Less than half-time at Name of College/University <input type="radio"/> Will not be attending college
6.			<input type="radio"/> Half-time or greater at Name of College/University <input type="radio"/> Less than half-time at Name of College/University <input type="radio"/> Will not be attending college

Note: Half-time is usually considered two courses per semester. If you have more than six family members, please attach an additional sheet.

B. 2010 Federal Income Tax Filing Status

Student/Spouse Check One:	2010 Federal Income Tax Filing Status	Parent(s) Check One:
<input type="radio"/>	Attached is a signed copy of my 2010 Federal Income Tax Return and W-2 forms.	<input type="radio"/>
<input type="radio"/>	I will file a 2010 Federal Income Tax Return and submit signed copies of my taxes and W-2 forms by _____ (date).	<input type="radio"/>
<input type="radio"/>	I requested a Federal Income Tax Extension from the IRS. Attached is a copy of Form 4868 and copies of my 2010 W-2 forms, or, if self-employed, a signed statement certifying estimated adjusted gross income for 2010.	<input type="radio"/>
<input type="radio"/>	I did not and am not required to file a 2010 Federal Income Tax Return.	<input type="radio"/>

C. Sources of Untaxed Income

Student/Spouse 2010 Annual Income	Sources of Untaxed Income	Parent(s) 2010 Annual Income
	Please list sources of untaxed income that you were not required to report on your Federal Income Tax Return.	
\$ Do not leave blank	If not filing a tax return, enter your earned income (refer to your 2010 W-2 forms).	\$ Do not leave blank
\$ Do not leave blank	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H and S.	\$ Do not leave blank
\$ Do not leave blank	Child support received and/or other monetary support received for all children. Do not include foster care or adoption payments.	\$ Do not leave blank
\$ Do not leave blank	Welfare Benefits, including Temporary Assistance for Needy Families. Do not include food stamps or subsidized housing.	\$ Do not leave blank
\$ Do not leave blank	Untaxed Social Security Benefits (such as SSI) paid directly to student.	\$ Do not leave blank
\$ Do not leave blank	Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits).	\$ Do not leave blank
\$ Do not leave blank	Veterans non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), etc.	\$ Do not leave blank
\$ Do not leave blank	Other untaxed income not reported, such as workers' compensation, disability, etc. Do not include student aid, earned income credit, child tax credit, welfare payments, untaxed Social Security benefits, supplemental security income, Workforce Investment Act educational benefits, combat pay (if you are not a tax filer), benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	\$ Do not leave blank
\$ Do not leave blank	Money received, or any money paid on your behalf, not reported elsewhere on this form.	\$ Do not leave blank

D. Additional Financial Information

Student/Spouse 2010 Annual Income		Parent(s) 2010 Annual Income
\$ Do not leave blank	Child support paid because of divorce or separation. Do not include support paid for children who are listed in the family size chart.	\$ Do not leave blank
\$ Do not leave blank	2010 Federal Work-Study earnings and/or earnings from work under a cooperative education program offered by a college.	\$ Do not leave blank
\$ Do not leave blank	Student grant, scholarship, and fellowship aid, including AmeriCorps awards, that was reported to the IRS in your adjusted gross income.	\$ Do not leave blank
\$ Do not leave blank	Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income.	\$ Do not leave blank

E. Asset Information

Student/Spouse		Asset Information	Parent(s)	
Value	Debt		Value	Debt
\$ Do not leave blank	X	Cash, Savings, Checking	\$ Do not leave blank	X
\$ Do not leave blank	X	Investments (stocks, bonds, CDs. Do not include retirement accounts)	\$ Do not leave blank	X
\$ Do not leave blank	\$ Do not leave blank	Home (primary residence)	\$ Do not leave blank	\$ Do not leave blank
\$ Do not leave blank	\$ Do not leave blank	Other Real Estate (rental property, vacation home, etc.)	\$ Do not leave blank	\$ Do not leave blank
\$ Do not leave blank	\$ Do not leave blank	Business/Farm: How many employees does this business have? <input type="radio"/> Less than 100 <input type="radio"/> More than 100	\$ Do not leave blank	\$ Do not leave blank

V. Comments (optional)

- Please check off if attaching an additional sheet providing information regarding special circumstances that might be helpful when assessing your financial need.

VI. Permission to Share Information/Certification of Accuracy

I understand the Office of Student Financial Services at Emmanuel College may have to discuss my tax return or other personal information with my child/parent/spouse or other College officials to clarify his/her eligibility for financial aid.

I attest that the information in this application and all submitted supporting documentation is true and complete to the best of my knowledge. I know that I am required to notify Emmanuel College if I receive other scholarships or grants not reported on my Financial Aid Award Letter and I understand that changes to my enrollment or housing status may affect my eligibility for financial assistance. I understand my financial aid is estimated until all requested documentation is submitted and the verification of application data is complete. **Please print, sign and submit to the Office of Student Financial Services.**

.....
Student's Signature

.....
Date

.....
Parent's Signature

.....
Date

.....
Parent's Cell Phone

.....
Parent's Work Phone

.....
Parent's E-mail

Please return this application to:



EMMANUEL COLLEGE

Office of Student Financial Services
400 The Fenway
Boston, MA 02115
or
fax to (617) 735-9939

Application Checklist

NOTE: Only complete applications will be processed.

Please review this application to ensure:

- All sections have been completed, that either an amount or a "0" (zero) has been entered where designated.
- Parent and student signed the application.
- Attached are signed copies of Student and Parent 2010 Federal Income Taxes and W-2 forms (if taxes have been filed).