

In 2010 or 2011, did you, your parents or anyone in your parents' household (listed above) receive benefits from any of the federal benefits programs listed? Check all that apply.

- Supplemental Security Income**
 Food Stamps
 Free/Reduced Price Lunch
 TANF
 WIC

* **Dislocated Worker** – In general, a person may be considered a dislocated worker if he or she:

- is receiving unemployment benefits due to being laid off or losing a job and is unlikely to return to a previous occupation;
- has been laid off or received a lay-off notice from a job;
- was self-employed but is now underemployed due to economic conditions or natural disaster; or
- is a displaced homemaker. A displaced homemaker is generally a person who previously provided unpaid services to the family (e.g., a stay-at-home mom or dad), is no longer supported by the husband or wife, is unemployed or underemployed, and is having trouble finding or upgrading employment.

If a person quits work, generally he or she is not considered a dislocated worker even if, for example, the person is receiving unemployment benefits.

As of today, is either of your parents a dislocated worker?

YES **NO**

As of today, are you a dislocated worker?

YES **NO**

C. Tax Forms and Income Information:

Tax returns include the 2011 IRS Form 1040, 1040A, 1040EZ, TeleFile Tax Record, a tax return from Puerto Rico or a foreign income tax return. If you did not keep a copy of your tax return, request a copy from your tax preparer or a copy of an Internal Revenue Service form that lists tax account information.

STUDENT MUST CHECK ONE BELOW:

- I filed a 2011 federal income tax return. **Please attach SIGNED copy of tax return (including all schedules) and all w-2 forms.**
 I did not work and I did not file in 2011.
 I did not (**and am not required to****) file a 2011 federal income tax return. **Attach w-2 and/or 1099 and complete box below:**

Employer: _____	Amount Earned: \$ _____
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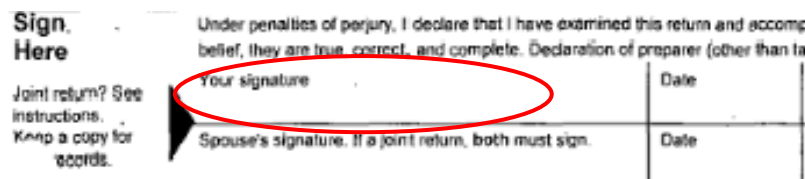
PARENT(S) MUST CHECK ONE BELOW:

- Parent(s) filed a 2011 federal tax return. **Please attach SIGNED copy of tax return (including all schedules) and all w-2 forms.**
 Parent(s) filed a foreign tax return or had income earned outside of the United States. **Please select below.**
 Parent filed a foreign tax return. **Please attach copy with English and U.S. currency conversion.**
 Parent earned income outside of the United States. **Please attach documentation confirming amount earned in 2011.**
 Parent(s) did not (**and are not required to****) file a 2011 federal income tax return. **Attach w-2 / 1099 and complete box below:**

Employer: _____	Amount Earned \$: _____
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****IRS guidelines require you to file a federal tax return if your *net* earnings from self-employment exceed \$400. If reporting self-employment earnings of more than \$400 on this form, please file a 2011 Federal Tax Return and submit a signed copy along with this form.**

**Be sure to sign tax documents to avoid delays in processing financial aid.
The image below shows where the signature must be located on the tax document.**



D. Additional Financial Information:

Complete the following worksheets using annual amounts from calendar year 2011. Students must complete the student section. Parent(s) must complete the parent section.

DO NOT LEAVE FIELDS BLANK; REPORT ZERO AMOUNTS AS \$0

Amounts from January 1, 2011- December 31, 2011

2011 Additional Financial Information

Student:

Parent(s):

Child support paid because of divorce or separation or as a result of a legal requirement. **Don't include** support for children in your household as reported in section B of this worksheet.

\$ _____

\$ _____

Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.

\$ _____

\$ _____

Student grant and scholarship aid **reported to the IRS in your adjusted gross income**. Include AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.

\$ _____

\$ _____

Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. Do not enter untaxed combat pay reported on your w-2 (box 12, code Q)

\$ _____

\$ _____

Earnings from work under a cooperative education program offered by a college.

\$ _____

\$ _____

2011 Untaxed Income

Student:

Parent(s):

Child support received for any children. **Do not include** foster care or adoption payments.

\$ _____

\$ _____

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 include** the value of on base military housing or the value of a basic military allowance for housing.

\$ _____

\$ _____

Veteran's non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.

\$ _____

\$ _____

Other untaxed income not reported, such as unemployment compensation, workers' compensation, disability, etc. Also include the first time home buyer tax credit from IRS Form 1040 line 67. Do not include student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Social Security Income, Workforce Investment Act educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.

\$ _____

\$ _____

Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form.

\$ _____

XXXXXXXX

E. Asset Information:**Do not leave any blank spaces; if the answer is zero place a \$0 on the line**

	Student	Parent(s)
1. As of the date you signed your FAFSA, what was the total current balance in cash and of all savings and checking accounts?	\$ _____	\$ _____

2. As of the date you signed your FAFSA, what was the net worth of investments, (Do not include real estate)? Net worth means current value minus debt.	\$ _____	\$ _____
Examples of investments to be included:		
<ul style="list-style-type: none"> • Stock options • UGMA & UTMA accounts • Mutual Funds • Coverdell savings accounts • Commodities, etc. 	<ul style="list-style-type: none"> • Trust Funds • Money Market Funds • Certificate of Deposit • 529 College Savings Plans • Bonds 	<ul style="list-style-type: none"> • Refund value of 529 prepaid tuition plans • Other securities • Installments and land sale contracts (including mortgages held)

3. Real Estate Investments:				
a. Is the home that your family owns and resides in a multifamily dwelling? (e.g., a portion of your home contains a rental unit)	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
If you answered YES to part 3a, please answer the following questions:				
What is the current market value of the property if sold today? \$ _____	What is the mortgage balance owed on the property? \$ _____	Number of family units in the property? _____		
b. Do you or your parent(s) own real estate other than your primary residence (may be listed on schedule E of 1040 tax form)?	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
If you answered YES to part 3b, please answer the following questions:				
What is the total current market value of all properties if sold today? \$ _____	What is the total mortgage balances owed on all properties? \$ _____			

	Student	Parent(s)						
4. Do you or your parents own a business?	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
5. If you answered YES to number 4, please answer the following questions:								
What type of business do you own? _____	How many full time employees do you have? _____							
As of the date you signed your FAFSA, what was the net worth of your current businesses and/or investment farms**?	\$ _____				\$ _____			
** Please include the market value of land, buildings, machinery, equipment, inventory, etc... minus the debt the business or investment farm was used as collateral. Do not include the value of a small business that you (and/or your parents) own and control and has less than 100 full time or full time equivalent employees. Also do not include a family farm that you (and/or your parents) live on and operate.								

F. Sign This Worksheet: (Verification will not be completed without signatures)**Student and at least one parent must sign.***By signing this worksheet we certify that all of the information reported is complete and correct.*

_____	_____
STUDENT SIGNATURE	DATE
_____	_____
PARENT SIGNATURE	DATE

Financial Aid Mailing and Contact Information

Please mail or fax all documents to the appropriate financial aid department listed below. Be sure to include the student's name and **Stony Brook ID** on all correspondence.

School of Medicine

Office of Student Affairs
HSC Level 4, Room 147
Stony Brook, NY 11794-8436
Telephone: 631-444-2341
Fax: 631-444-8921
mallen@notes.cc.sunysb.edu

School of Dental Medicine

Office of Academic Affairs, Admissions
115 Rockland Hall, Financial Aid
Stony Brook, NY 11794-8709
Telephone: 631-632-3027
Fax: 631-632-7130
Deborah.Schade@stonybrook.edu

Schools of Nursing, Social Welfare, Health Technology and Management, and the Graduate Program in Public Health

Health Sciences Center Office of Student Services
HSC Level 2, Room 271
Stony Brook, NY 11794-8276
Telephone: 631-444-2111
Fax: 631-444-6035
hscstudentservices@stonybrook.edu

All Other Graduate and Undergraduate Programs

Office of Student Financial Aid Services
Administration Building Room 180
Stony Brook, NY 11794-0851
Telephone: 631-632-6840
Fax: 631-632-9525
finaid@stonybrook.edu