

OFFICE OF FINANCIAL AID  
 (845) 257-3250  
 FAX (845) 257-3568

FORM B  
 2007-2008

Student's Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

1. Parents' 2006 U. S. Income Tax Return:  
 (Check Box A or B)

A.  We/I did or will file a 2006 Federal Tax Return

(If you checked this box, **attach a signed copy of the tax return with all schedules and W-2s** to this form and return it to the Financial Aid Office.)

B.  We/I will not file a 2006 Federal Tax Return

(If you checked this box, **complete parts 2 and 3**, sign at the bottom, and return form to the Financial Aid Office.)

2. Parents' Statement of Earnings/Income:

We/I did not file a 2006 Income Tax Return. We/I will, if requested, provide official confirmation from the Internal Revenue Service. Earnings/income during the period of 1/1/06 through 12/31/06 were from the sources and in the amounts listed below.

SOURCE OF EARNINGS/INCOME:

AMOUNT:

A. \_\_\_\_\_

\$ \_\_\_\_\_

B. \_\_\_\_\_

\_\_\_\_\_

**EVERYONE MUST COMPLETE PART 3 BELOW.**

<u>3. OTHER SOURCES OF</u>	<u>YEARLY</u>	
<u>PARENTS' 2006 INCOME</u>	<u>AMOUNT</u>	<u>VALUE/PRINCIPAL</u>
A. Social Security -----	\$ _____	
B. Child support received for all children -----	_____	
C. AFDC/ADC -----	_____	
D. Interest -----	_____	\$ _____
E. Dividends -----	_____	_____
F. Trust fund income -----	_____	_____
G. Other income -----	_____	

CERTIFICATION STATEMENT AND SIGNATURES

We/I certify that all the information reported on this form and attachments is true, complete, and accurate to the best of our/my knowledge. We/I understand that any false statements could be cause for denial, reduction, withdrawal, or repayment of our/my financial aid.

Signature of Father: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Mother: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_