

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

FORM A
2008-2009

Student's Name _____

Student ID/Social Security Number _____

1. Student's (and spouse's) 2007 U.S. Income Tax Return:
(Check Box A or B)

- A. I (and/or my spouse) did or will file a 2007 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. I (and/or my spouse) will not file a 2007 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. Student's (and spouse's) Statement of Earnings/Income:

I (and/or my spouse) did not file a 2007 Federal Tax Return. I (and/or my spouse) will, if requested, provide official confirmation from the Internal Revenue Service. Earnings/income during the period of 1/1/07 through 12/31/07 were from the sources and in the amounts listed below.

SOURCE OF EARNINGS/INCOME:

AMOUNT:

A. _____ \$ _____

B. _____ _____

EVERYONE MUST COMPLETE PART 3 BELOW.

<u>OTHER SOURCES OF</u> <u>STUDENT'S 2007 INCOME</u>	<u>YEARLY</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

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

Signature of Student

Date

Signature of Spouse (if applicable)

Date