

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

FORM A  
2009-2010

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

Student ID/Social Security Number \_\_\_\_\_

1. Student's (and spouse's) 2008 U.S. Income Tax Return:  
(Check Box A or B)

- A.  I (and/or my spouse) did or will file a 2008 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 2008 Federal Tax Return.  
(If you checked this box, **complete part 2 below**, 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 2008 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 1/1/08 through 12/31/08 were from the sources and in the amounts listed below.

<u>SOURCE OF EARNINGS/INCOME:</u>	<u>AMOUNT:</u>
A. Earnings from work not reported on tax return	\$ _____
B. Untaxed Pensions	\$ _____
C. Disability Income	\$ _____
D. Child support received for all children	\$ _____
E. Worker's Compensation	\$ _____
F. Interest/Dividends	\$ _____
G. Trust Fund Income	\$ _____
H. Bills paid on your behalf	\$ _____
I. Housing Allowance (military/clergy)	\$ _____
J. Veteran's Non-Education Income	\$ _____
K. Value of living expenses paid by others	\$ _____
L. Any other untaxed 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