

2018-2019 AID FOR PART-TIME STUDY (APTS) APPLICATION

Name: _____

Banner ID: _____

1. Are you a legal resident of New York State? Yes No
2. Marital status as of 12/31/16 (Check only one):
 Unmarried (single, divorced or widowed) Married Separated
3. Will all or part of your tuition charges be paid or reimbursed by an employer? Yes No
If YES, enter amount for per semester \$ _____
4. Were you required file a 2016 NYS tax return? (Check one box):
 No — I DID NOT FILE any tax return, I did not work in 2016
 No — I worked but DID NOT FILE any tax return, copies of all 2016 W-2s attached
 Yes — I FILED A NYS TAX RETURN (IT-201), signed copy of 2016 NYS tax return attached
 Yes — I FILED A FEDERAL RETURN ONLY (1040/1040A/1040EZ), signed copy of federal tax return attached
5. Were you claimed/eligible to be claimed as a dependent on your parents' New York State or federal tax return for 2016? Yes No
If you answered "YES" to this question then you must answer question #6 and provide the paperwork indicated.
6. Were your parents required to file a 2016 NYS tax return?
 No — My parent(s) DID NOT FILE any tax return, they did not work in 2016
 No — My parent(s) worked but DID NOT FILE any tax return, copies of all 2016 W-2s attached
 Yes — My parent(s) FILED A NYS TAX RETURN (IT-201), signed copy 2016 NYS tax return attached
 Yes — My parent(s) FILED A FEDERAL RETURN ONLY (1040/1040A/1040EZ), signed copy of 2016 federal tax return attached

AFFIRMATION: I hereby certify that all the information provided by me upon this application is accurate and complete. I authorize the school to release to NYS Higher Education Services Corporation (NYSHESC) any information requested pertinent to this application. I consent to the verification by NYSHESC of any statement made herein and authorize the NYS Department of Taxation and Finance to release to NYSHESC certified copies of my personal income tax returns for 2016. I consent to the release by NYSHESC of such information as may be provided by law or regulation in the course of financial aid program administration.

Student's Signature

Parent's Signature

Spouse's Signature

Submit completed application and SIGNED copies of 2016 state tax return(s) to:

SUNY Adirondack
ATTN: Financial Aid Office
640 Bay Road
Queensbury, NY 12804
Email: finaidoffice@sunyacc.edu Fax: (518) 743-2314

Instructions for preparing an application for APTS

A) Student Eligibility at SUNY Adirondack

To be eligible for APTS at SUNY Adirondack in 2018-2019 a student must:

- Be a legal resident of New York State for at least one year prior to the start of the term.
- Be a U.S. citizen or eligible non-citizen.
- Dependent students must have a 2016 family (student and parent combined) New York net taxable income that does not exceed \$50,500. Independent students must have a 2016 family (student and spouse combined) New York net taxable income that does not exceed \$34,250.
- Have not exhausted eligibility under New York's Tuition Assistance Program (TAP).
- Have a GPA of at least 2.0 at SUNY Adirondack if a continuing or returning student.
- Be enrolled in a degree or certificate program in which you have not already earned a diploma.
- Be enrolled for at least six but less than twelve credits per semester in courses for which you have not previously received a passing grade and which are required for your SUNY Adirondack degree or certificate.
- Be in good academic standing as defined in the SUNY Adirondack Catalog.
- Not be in default on a student loan.

B) Student Application Procedure

Each student must file a 2018-2019 Free Application for Federal Student Aid (FAFSA) and submit all requested documentation to the SUNY Adirondack Financial Aid Office. In addition, students must submit the following documents directly to the SUNY Adirondack Financial Aid Office:

- 1) An APTS application
- 2) 2016 New York State tax return(s)

Only one application per academic year is required. This is a limited-funds program so all students are encouraged to apply as early as possible before funds are expended. APTS is awarded during the fall and spring semesters, but not during the summer or winter terms.

C) Recipient Selection and Award Determination

Students who meet both Section A's eligibility requirements and Section B's application requirements will receive APTS according to the following schedule, as based on enrollment at end of third week*

Half-Time (6, 7 or 8 credits) - \$500

Three-Quarter Time (9, 10 or 11 credits) \$1,000

- Every effort will be made to notify the recipient of the award amount prior to the due date of the term's tuition bill, in which case the award will be made in the form of a tuition deferment.
- If the award is made after the tuition has been paid, SUNY Adirondack will refund the tuition to the student approximately eight weeks after the start of the term.
- Recipients who are no longer enrolled in at least six credits at the end of the bill adjustment period will have their awards rescinded.
- Recipients must meet the Satisfactory Academic Progress and Pursuit of Program requirements as defined in the Financial Aid Section of the *SUNY Adirondack Catalog* to be eligible for subsequent payments of APTS or other NYS programs, such as TAP
- Receiving APTS for one term uses one-half of one term's eligibility for NYS programs.

**Only credits required for a SUNY Adirondack degree or certificate are considered for funding under this program. Award amounts are subject to adjustment if the tuition liability has been adjusted to less than the standard award.*

DISCLOSURE OF SOCIAL SECURITY NUMBERS

Disclosure of your Social Security Number and the Social Security Numbers of your family is mandatory and has been authorized by NYS Education Law § 661 subdivision (2).

NO DISCRIMINATION ON THE BASIS OF DISABILITY

We do not discriminate against handicapped persons in our employment practices or in the administration of our programs, activities, or services.