2023-2024 INSTITUTIONAL EVALUATION FORM

Request to evaluate financial aid eligibility for additional institutional aid.

| | First Nam | e: | | MI: | |
|--|---|--|--|--|--|
| Student ID (if not known, last 4 digits of Social Secu | rity Number): | | Date | of Birth: | |
| Permanent Address: | | | | | |
| City, State, Zip: | | Phone # | () | | |
| | | | | | |
| Are you eligible to file a FASFA? (check one) Please provide information about your house | ehold below. | lo □ Choose not to a | answer | | |
| Please see page two to determine your depe | endency status. | | | | |
| If you are a dependent student, include: • Yourself | | If you are an independent st • Yourself | udent, include: | | |
| Your Parent(s) – including step-parents | | Your spouse (if you are ma | married) | | |
| • Your Parent(s)' other children if your parents will provid | e more than half of | | | half of their support from July 1, | |
| their support from July 1, 2023, through June 30, 2024. | abold and your | 2023 through June 30, 202 | | shold and you provide more than | |
| Other people only if they now live in your parent's hous parents will provide more than half of their support fror | | half of their support and w | - | ehold <u>and</u> you provide more than o so from | |
| July 1, 2023 through June 30, 2024. | | July 1, 2023 through June 3 | | | |
| Name | Age | Relationship Name of Coll | | of College/University | |
| | | Self | | Alverno College | |
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| If more sp | ace is required, p | ease attach a separate ¡ | page. | | |
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| • | - | t(s). Please calculate eitl | her a monthly | y amount or an annual amou | |
| Complete the income worksheet below for the sor each item below. Enter zero if not applicable. 2021 Income | - | t(s). Please calculate eitl MONTHLY Amount | her a monthly | y amount or an annual amou | |
| r each item below. Enter zero if not applicable. | - | T | | | |
| r each item below. Enter zero if not applicable. 2021 Income Money Earned from Working* Child Support or Alimony Received | | T | OR | | |
| r each item below. Enter zero if not applicable. 2021 Income Money Earned from Working* Child Support or Alimony Received Workers Comp/Disability or Unemployment Be | enefits | T | OR | | |
| 2021 Income Money Earned from Working* Child Support or Alimony Received | enefits | T | OR | | |
| r each item below. Enter zero if not applicable. 2021 Income Money Earned from Working* Child Support or Alimony Received Workers Comp/Disability or Unemployment Be | enefits | T | OR | | |
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| 2021 Income Money Earned from Working* Child Support or Alimony Received Workers Comp/Disability or Unemployment Be Money received not reported elsewhere on thi Assets/Savings Current amount in Cash, Savings, Checking Acc | enefits is form ounts ther retirement sa | MONTHLY Amount | OR | | |
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ALVERNO OFFICE P 414-382-6262 F 414-382-6479 financial.aid@alverno.edu alverno.edu

CRI: FC23INST

Dependency Status Questions

| Were you born before Jan. 1, 1997? | Yes | No | |
|--|-----|-----|----|
| As of today, are you married? (Also answer "Yes" if you are separated but not divorced.) | Yes | No | |
| At the beginning of the 2023–24 school year, will you be working on a master's or doctorate program (such as an M.A., MBA, M.D., J.D., Ph.D., Ed.D., graduate certificate, etc.)? | | No | |
| Are you currently serving on active duty in the U.S. armed forces for purposes other than training? (If you are a National Guard or Reserves enlistee, are you on active duty for other than state or training purposes?) | Yes | No | |
| Are you a veteran of the U.S. armed forces?* | Yes | No | |
| Do you now have—or will you have—children who will receive more than half of their support from you between July 1, 2023, and June 30, 2024? | | No | |
| Do you have dependents (other than your children or spouse) who live with you and who receive more than half of their support from you, now and through June 30, 2023? | | No | |
| At any time since you turned age 13, were both your parents deceased, were you in <u>foster care</u> , or were you a dependent or ward of the court? | Yes | No | |
| Has it been determined by a court in your state of legal residence that you are an <a docs.py.ncb.ncb.nlm.ncb.ncb.ncb.ncb.ncb.ncb.ncb.ncb.ncb.ncb<="" href="mailto:ema</td><td>No</td></tr><tr><td>At any time on or after July 1, 2022, were you determined to be an unaccompanied youth who was <td>Yes</td><td>No</td> | | Yes | No |

^{**}If you do not have a determination that you are homeless, but you believe you are an unaccompanied youth who is homeless or self-supporting and at risk of being homeless, answer "No" to the questions concerning being homeless. Then contact your financial aid office to explain your situation. "Homeless" means lacking fixed or regular housing. You may be homeless if you are living in shelters, parks, motels, hotels, cars, or temporarily living with someone else because you have nowhere else to go.

What if I answered "Yes" to one or more of the questions above?

If so, then for student aid purposes, you're considered to be an independent student and will not provide information about your parents on the form.

What if I answered "No" to every question?

If so, then for student aid purposes, you're considered to be a dependent student, and you must provide information about your parents on the form.

