## **Carson-Newman University**

## Application for Need-Based Aid for Undocumented/DACA Students

(Not applicable for International Students and US Citizens/Eligible Non-Citizens)

Student's Last Name		Student's First Name Student's		Student's M.I.	Student's CN Identification (ID) Number		
Stu	Student's E-Mail Address				Student's Home/Cell Ph	Student's Home/Cell Phone Number	
Δ	Household Infor	mation					
۸.		le in living witl	h you in y	our parent/stepparent(s	s)' household. Please be sure to	o include:	
	<ul> <li>Your parent and</li> </ul>	,	ur parent	is remarried.			
		parent(s)' other			s) will provide more than half of th	eir support from July 1	
	ore than half of their						
<ul> <li>Other people if they now live with your parent/stepparent(s) and your parent/stepparent(s) provide more that support and will continue to provide more than half of their support through June 30, 2023.</li> </ul>							
		·		• •	,		
	Include the name of t	he college/univ	ersity for a	ny sibling, who will be en	rolled, <u>at least half time</u> in a degre	ee, diploma, or	
	certificate program at	a postseconda	ry education	onal institution any time b	etween July 1, 2022, and June 3	0, 2023. <i>If more space</i>	
	is needed, attach a se	eparate page w	ith the stu	dent's name and ID numl	ber at the top.		
	Household	Age		Name	Name of College/University	Enrolled at Least	
	Members				Attending	Half Time (Y/N)	
	Student				Carson-Newman University		
	Parent/Stepparent						
	Parent/Stepparent						
	Sibling						
	Sibling						
	Sibling						
	Sibling						
	Sibling						
	Other						
	Other						
В.		f the parent/sto		' 2021 Federal Income ī I, please provide a copy	Fax Return, y of all 2021 W-2 Forms received	d by the parents	
C.				eral Income Tax Return	ı,		
	If a 2021	Toy Boturn wo	a not files	l places provide a cons	of all 2021 W 2 Forms received	d by the student	

		Pa	age 2 of 2					
Stu	dent's Last Name	Student's Identification (ID) Number						
D.	Housing							
	During the 22-23 school year, the student will be	living: at home or on campus.						
E.	Signatures							
	The student and one parent must sign and date below.							
	Each person signing this worksheet certifies that all the information reported is complete and correct.							
	Student's Signature	Date						
	Parent/Stepparent's Signature	Date						
	Parent/Stepparent's Email	Parent/Stepparent's Contact Phone	#					
**F	or Financial Aid Office Use Only**							
То	tal 2021 Parent Income: \$							
То	tal 2021 Student Income: \$							
Nu	mber in Household Number in	College						
Ca	lculated EFC:							
Liv	ring with Parents On Campus (circle one,	)						