

LAST NAME	FIRST NAME	STUDENT ID #	DATE OF BIRTH	PHONE NUMBER

Submit in person, via myTRCC Student Information System, student e-mail, fax, or the mailing address listed at the bottom of this page. If more space is needed for any line item on this form, provide a separate page with the student's name and ID number at the top.

SECTION 1 -- NUMBER OF HOUSEHOLD MEMBERS & NUMBER IN COLLEGE

INSTRUCTIONS FOR *DEPENDENT* STUDENTS:

- List below the people in the parents' household. Include:
- § The **student** & the **parents** (including a **stepparent**), even if the student doesn't live with the parents.
 - § The **parents' other children** if the parents will provide more than half of the children's support from July 1, 2023, through June 30, 2024, or if the other children would be required to provide parental information if they were completing a FAFSA for 2023-2024. Include children who meet either of these standards, even if a child does not live with the parents.
 - § **Other people** if they now live with the parents and the parents provide more than half of the other person's support, and will continue to provide more than half of that person's support through June 30, 2024.

<----(or)---->

INSTRUCTIONS FOR *INDEPENDENT* STUDENTS:

- List below the people in the student's household. Include:
- § The **student** & the **student's spouse** if the student is married.
 - § The **student's or spouse's children** if the student or spouse will provide more than half of the children's support from July 1, 2023, through June 30, 2024, even if a child does not live with the student.
 - § **Other people** if they now live with the student and the student or spouse provides more than half of the other person's support and will continue to provide more than half of that person's support through June 30, 2024.

* Number in College: (excluding the parents) select who is, or will be, enrolled at least half time in a degree, diploma, or, certificate program at an eligible postsecondary educational institution any time between July 1, 2023, and June 30, 2024, and include the name of the college.

FIRST NAME	M.I.	LAST NAME	AGE	RELATIONSHIP	Will be enrolled at least Half Time in College? (Yes or No)*	COLLEGE NAME *
				Yourself		Three Rivers College

SECTION 2 -- TAXES (Complete *ONE* "Option" *EACH* for student and for spouse [if married], and/or for parents if student is dependent.)

I FILED A 2021 INCOME TAX RETURN WITH THE IRS AND...		STUDENT	SPOUSE (if married)	PARENT 1 (if dependent)	PARENT 2 (if dependent)
Option 1	Have used the IRS Data Retrieval Tool (DRT) in FAFSA on the Web to transfer 2021 IRS income tax return information into the student's FAFSA.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Option 2	Have provided the Office of Financial Aid with a 2021 IRS Tax Return Transcript(s) and W2's or a signed copy of the 2021 income tax return, applicable schedules, and W2's	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I WILL NOT FILE & AM NOT REQUIRED TO FILE A 2021 INCOME TAX RETURN WITH THE IRS. You must submit a Verification of Non-Filing letter (except dependent students) for Options 3 & 4. Go to https://www.irs.gov/pub/irs-pdf/f4506t.pdf , complete the form, fax to 1-855-821-0094. The IRS will mail you a Verification of Non-Filing Letter for the 2021 year that must be submitted to financialaid@trcc.edu		STUDENT	SPOUSE (if married)	PARENT 1 (if dependent)	PARENT 2 (if dependent)
Option 3	WAS NOT EMPLOYED and had no income earned from work in 2021. (Check box to right)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Option 4	WAS EMPLOYED in 2021 and have listed below the names of ALL employers, the amount earned from each employer in 2021, and have provided an IRS W-2 form or an equivalent document (Check boxes to right & complete section below) <i>List every employer even if the employer did not issue an IRS W-2 form.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
STUDENT/SPOUSE 2021 INCOME FROM WORK		PARENTS 2021 INCOME FROM WORK			
List every employer, even if the employer didn't issue an IRS W-2 form.		List every employer, even if the employer didn't issue an IRS W-2 form.			
Source: _____	\$ _____	<input type="checkbox"/>		Source: _____	\$ _____
Source: _____	\$ _____	<input type="checkbox"/>		Source: _____	\$ _____
Source: _____	\$ _____	<input type="checkbox"/>		Source: _____	\$ _____
Source: _____	\$ _____	<input type="checkbox"/>		Source: _____	\$ _____
Total Amount of Income Earned from Work \$ _____		Total Amount of Income Earned from Work \$ _____			

Warning: If you purposely give false or misleading information you may be fined, sentenced to prison, or both. Each person signing certifies that all of the information reported is complete and correct. You must print, sign, and date this form.

Student Signature: _____	Date: _____	Parent/Spouse Signature: _____	Date: _____
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Three Rivers College is an equal opportunity institution that commits itself to the policy that there will be no unlawful discrimination against any person because of race, color, gender, sexual orientation, religion, age, disability, or national origin.

Identity and Statement of Educational Purpose

You, the student, must appear in person at Three Rivers College to verify your identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of your photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review your ID. In addition, you must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

ONLY to be signed AT THE INSTITUTION or in the presence of a Notary Public

AUTHORIZED COLLEGE OFFICIAL:

Copy student unexpired valid government-issued photo ID **AT THE TIME of their signing** the Statement and **annotate that copy with your name and the date**, verifying student identity. You may place it below and make a copy:

AUTHORIZED OFFICIAL NAME

DATE

STUDENT:

Statement of Educational Purpose

I certify that I _____
(Print Student's Name)
 am the individual signing this *Statement of Educational Purpose* and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Three Rivers College for 2023-2024.

(Student's Signature)

(Date)

REQUIRED: (Student's ID#)

Warning: If you purposely give false or misleading information, you may be fined, be sentenced to prison, or both.

If you're unable to be present at Three Rivers: Notary's Certificate of Acknowledgement (below)

If you, the student, are unable to appear in person at Three Rivers College to verify your identity, you must provide to the institution:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to a driver's license, other state-issued ID, or passport; and
- (b) The original Statement of Educational Purpose provided above, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

THIS STATEMENT & COPY OF ID MUST BE SUBMITTED TO THREE RIVERS IN ORIGINAL PAPER FORM.

State of _____ City/County of _____ On (date) _____, before me,
(Notary's name) _____, personally appeared, (Printed name of signer)
 _____, and proved to me on because of satisfactory evidence of identification
 _____ to be the above-named person who signed the foregoing instrument.
(Type of unexpired government-issued photo ID provided)

WITNESS my hand and official seal
 (seal)

(Notary signature)

My commission expires on _____
(Date)

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