

Aid for Part-Time Study (A.P.T.S.) Application

Academic Year 2 0 -

Submit completed application to your school's Financial Aid Office

SCHOOL NAME

1. Social Security Number

2. Student ID

3. Date of Birth (Use numbers only)

Month Day Year(CCYY)

4. Last Name First Name MI

5. Address: number, street, apartment

City or Town State Zip Code

Home Phone Number Work Phone Number

E-mail Address

6. Are you a legal resident of New York State? (See instructions on page 1.) YES NO
7. Check the box that applies to you (See instructions on page 2.)
 Citizen Eligible Non-Citizen Not a Citizen or Eligible Non-Citizen
8. Marital status (Check only one box)
 Single Married Separated/Divorced/Widowed
9. If married, enter the date you were married. If separated/divorced or widowed, give earliest date on which you were separated/divorced or widowed.
Month Year(CCYY)
10. Have you graduated, or will you graduate from high school in the United States; or have you received or will you receive a GED? YES NO
11. Will all or part of your tuition charges be paid or reimbursed by an employer? YES NO
 If yes, enter amount if known \$ _____

APPLICANT/SPOUSE (IF MARRIED) INCOME STATEMENT - (All applicants must answer Questions 12 and 13.)

12. Enter your exemptions and income, which is your combined taxable income and required pension and annuity income, in the boxes provided. For the 2022-2023 academic year students will use prior-prior tax data (2020 tax information) to complete both their federal and New York State financial aid applications. Prior-prior year data will also be used when completing the APTS application for 2022-2023.

Applicant's Separate Income OR Joint Income with Spouse	
Exemptions	Income
	
\$	\$
	.00
	DOLLARS Cents

Spouse's Separate Income Only	
Exemptions	Income
	
\$	\$
	.00
	DOLLARS Cents

13. Were you eligible to be claimed or were you claimed as a dependent on your parents' New York State or federal tax return for the previous year?

- YES - If yes, YOU MUST REPORT PARENTS' INCOME below.
- NO - If no, read and sign the affirmation on the bottom of this page and if married, your spouse must also sign and enter Social Security number. If you have dependents of your own other than a spouse, check this box.

If you answered "YES" to question 13, that is, you were claimed or were eligible to be claimed as a tax dependent, you must report parental income in question 15. If your parents (stepparents, adoptive parents) filed a tax return as married, you must report total income for both parents.

14. EXCLUSION OF PARENTS' INCOME - If your parents are divorced, separated, never married or one of your parents is deceased, report in question 14 the income of the parent with whom you lived most in the previous year or who had custody or would have had custody if you were a minor.

TO EXCLUDE THE INCOME OF PARENT1 (Stepparent, adoptive parent) OR PARENT2 (stepparent2, adoptive parent2) give the reason by checking the appropriate box. Enter the date of death or separation/divorce and enter the amount of support received if separated/divorced. Only one parent's income can be excluded for separation/divorce.

To exclude PARENT1's Income Deceased separated or divorced GIVE EARLIEST DATE _____
(use numbers only) Month / Year (CCYY)

To exclude PARENT2's Income Deceased separated or divorced GIVE EARLIEST DATE _____
(use numbers only) Month / Year (CCYY)

Support Amount - Enter the amount of support received for you from the parent whose income is to be excluded. If none, enter zero. \$ _____

(Note: Any separation must be by judicial decree or pursuant to an agreement of separation which is filed by a court of competent jurisdiction.)

15. ENTER PARENTS' EXEMPTIONS AND INCOME IN THE BOXES PROVIDED.

For the 2022-2023 academic year students will use prior-prior tax data (2020 tax information) to complete both their federal and New York State financial aid applications. Prior-prior year data will also be used when completing the APTS application for 2022-2023.

Parent1's Separate Income OR Joint Income with Parent2	
Exemptions	Income
_____	\$ _____

Parent2's Separate Income	
Exemptions	Income
_____	\$ _____

OFFICE USE ONLY			
A			.00
P			.00
S			.00
T			.00
DOLLARS			Cents

16. ALL PERSONS WHOSE INCOMES ARE LISTED IN QUESTIONS 12 AND 15 must read and sign the affirmation.

AFFIRMATION - I hereby certify that all the information provided by me upon this application is accurate and complete. This information will be accepted for all purposes as the equivalent of an affidavit and, if it contains a false statement, shall subject me to the same penalties for perjury as if I had been duly sworn. I authorize the school to release to Higher Education Services Corporation (HESC) any information requested pertinent to this application. I consent to the verification by HESC of any statement made herein and authorize the NYS Department of Taxation and Finance to release to HESC certified copies of my personal income tax returns. I consent to the release by HESC of such information as may be provided by law or regulation in the course of financial aid program administration.

Student's Signature	Date		
Student's Spouse's Signature	Date	Spouse's SSN	_____
Parent1's Signature	Date	Parent1's SSN	_____
Parent2's Signature	Date	Parent2's SSN	_____
		First 3 Letters of Parent1's Last Name	_____
		First 3 Letters of Parent2's Last Name	_____

BRING OR MAIL THE COMPLETED APPLICATION TO YOUR SCHOOL'S FINANCIAL AID OFFICE.