

2012-2013 Texas Application for State Financial Aid (TASFA)

(for House Bill 1403/Senate Bill 1528 students only)

Name

Street address

City

State

ZIP code

Telephone

Email address









Date of birth (MM/DD/YYYY)

Student ID#

House Bill 1403 from 2001 State Legislative Session /Senate Bill 1528 from 2005 State Legislative Session: Certain categories of foreign-born and immigrant students in the State of Texas can meet state requirements for residency under Texas Education Code, Chapter 54, Section 54.052(a)(3). This state law allows such students to pay the resident tuition rate while attending public institutions of higher education in Texas, and be classified as state residents for tuition purposes. As Texas residents, such students are eligible to apply for some student financial aid programs offered by the State of Texas.

Please note: For a student to qualify for **state** student financial aid, the college or university must first make the determination on the student's residency status. Also, keep in mind that the state's definition of residency does not make a student eligible for **federal** financial aid.

Section I: Student Information

1. Were you born before January 1, 1989?  Yes No
2. As of today, are you married?  Yes No
3. Are you in a graduate program of study? (e.g., master's or doctoral program)  Yes No
4. Do you have at least one child that you support?  Yes No
5. Do you have dependents other than your children or spouse that you support?  Yes No
6. Are you an orphan or ward of the court?  Yes No
7. Are you or were you an emancipated minor as determined by the state's court? Yes No
8. Are you or were you in legal guardianship as determined by the state's court?  Yes No
9. Did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless?  Yes No
10. Did the director of an emergency shelter program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless? Yes No
11. Did the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless? Yes No

For purposes of this application, if you answered **"No" to all of the questions above**, you are considered a **dependent student** and must include parental income information on this form.

If you answered **"Yes" to any of the questions above**, you are considered an **independent student** and are not required to include parental income information on this form. An **independent student** who is married must include information about his or her spouse.

Print full name here:

Section IV: Income and Assets

Do not leave any blanks. Enter "0" where appropriate.

Dependent students: Complete both the *Student and Parent(s)* columns.

Independent students: Complete the *Student/Spouse* column only.

	Student/Spouse		Parent(s)	
Part A. Annual Untaxed Income				
27. Child support received ?	\$		\$	
28. Tax exempt interest income ?	\$		\$	
29. Housing, food, and other living allowances paid on your behalf ?	\$		\$	
30. Other untaxed income not reported, such as worker's compensation, disability, etc. ?				
31. Money received, or paid on your behalf (e.g., bills) not reported elsewhere on this form ?	\$			
32. Cash earnings (wages not listed on taxes or W-2 forms) ?	Student	Spouse	Mother	Father
	\$	\$	\$	\$
Total Untaxed Income	\$		\$	
Part B. Annual Income Exclusions				
33. Child support paid ?	\$		\$	
34. Taxable earnings from work-study or other need-based work programs	\$		\$	
35. Taxable scholarships and grants reported on 2011 federal income tax return ? ?	\$		\$	
Part C. Assets				
36. As of today, balance of cash, savings, and checking accounts ?	\$		\$	
37. As of today, investment net worth (do not include the home you live in or the balance of retirement plans) ?	\$		\$	
38. As of today, net worth of current business(es) or investment farm(s) ?	\$		\$	

Section V: Total Family Income

39. Was your **TOTAL FAMILY INCOME less than \$6,500 in 2011?**


(TOTAL FAMILY INCOME is the income reported on your parent's and your W-2 IRS tax forms **plus** the Total Untaxed Income reported on Section IV, Part A of this form for you and your parent(s)) ?

Yes No


If YES, please include a breakdown of your living expenses (e.g., rent, food, utilities, etc.) and provide a written summary that explains how you were able to pay for your living expenses in 2011. Attach additional sheet(s) if necessary.

Print full name here:

Section VI: Statement of Selective Service Registration Status

40. Certification of registration status (Please check the appropriate box.) 
- I certify that I am female and, therefore, not required to register with the Selective Service System.
 - I certify that I am a male age 18 to 25 and am registered with the Selective Service System.
Please attach copy of registration acknowledgement card.
 - I certify that I am not of an age required to register with Selective Service System. (That is, I am over 25.)
 - I certify that I have been determined by the Selective Service System to be exempt from registration.
 - I certify that I have not reached my 18th birthday and understand that I will be required by law to register at that time.
 - I certify that I do not have a Social Security Number, but have submitted my Selective Service registration form to the Selective Service System and will provide proof of registration to the financial aid office as soon as I receive my registration number.

Section VII: Signatures

41. a. **Student and Parent signatures** 
- I understand that under Texas Education Code, Section 51.9095, I must be registered with the Selective Service System according to the requirements of federal law in order to receive student financial aid funds from the State of Texas, and hereby certify that I meet this requirement. I also certify that I will use state student financial aid to pay only the cost of attending an institution of higher education, and that the information provided on this form is true, complete, and correct to the best of my knowledge. I understand that any false statements may void my eligibility for state financial aid. I also certify that the information provided on this form will be used only for evaluation of eligibility for state financial aid and that I may need to provide additional information for my school to determine eligibility for state financial aid.

Student signature _____ Date _____

Parent signature* _____ Date _____

(*Parent signature required only for dependent students)

- b. **High School Counselor: Not required if parent signature already provided above.**

High school counselor signature _____ Date _____

Printed name _____

Title _____

Street address _____

City _____ State _____ ZIP code _____

Telephone _____

Email address _____

Print full name here: _____