

**A. Student Information**

Last Name First Name Date of Birth Capital Student ID

Parent Email Address Preferred Phone Number

**B. Parent Information**

COMPLETE THE TABLE BELOW.

- **Include** your parent(s) with whom you live (or last lived with) -**Include** step-parent, if applicable and married;
- **Include** your parent(s)' most recent marital status and the marital date. No date is required for single/unmarried parents. *If recently widowed write in margin and include date.*
- **Do NOT include** a parent that is not living in the household due to separation or divorce.
- **Do NOT include** your parent's significant other that is not your parent unless they are married to your parent.

Full Name	Date of Birth	Relation	Marital Status and Date
		Parent	<input type="checkbox"/> Unmarried, both parents together <input type="checkbox"/> Single <input type="checkbox"/> Married* <input type="checkbox"/> Divorced/Separated*
		Parent/ Step-Parent	*Date of Most Recent Marital Status _____ / _____ MM / YYYY

**C. Family Information**

COMPLETE THE TABLE BELOW.

- **Include** your parents' children (including any unborn children that are expected to be born prior to July 1, 2023) if they will provide more than half of the children's support from July 1, 2022 - June 30, 2023;
- **Include** other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support from July 1, 2022 - June 30, 2023.
- **Do NOT include yourself or parent(s) in the boxes below.** That information is reported in Section A and B.

Indicate if any below individuals will be enrolled in a degree or certificate program at a college, university or other post-secondary institution at least half-time between July 1, 2022 and June 30, 2023. *Middle or high school students in college courses such as AP or CCP classes are not considered as "in college."* **\*\*Please indicate the name of the college they will be/plan to attend in 2022-23\*\***

Full Name	Age	Relation to Student	Name of College they will attend 2022-2023

*(Attach a separate sheet or list below in margin if you need more room.)*

**More questions are on the back side of this worksheet.**

**DO NOT COMPLETE - FOR OFFICE USE ONLY:**

Total Household Size: \_\_\_\_\_

Total Number in College: \_\_\_\_\_

## D. Tax Filing Status and Income Information

COMPLETE BOTH ITEMS, 1) & 2) BELOW.

PARENT(S)	
<b>1) Check one of the following:</b>	
<input type="checkbox"/>	My parent(s) filed a 2020 Federal Tax Return. * <b>Circle one:</b> Tax Transcript/Return Enclosed <u>or</u> IRS DRT Used
<input type="checkbox"/>	My parent(s) were not employed and had no earned income in 2020 and did not file a 2020 Federal Tax Return. †
<input type="checkbox"/>	My parent(s) did not file a 2020 Federal Tax Return but did work and/or have earned income. The earned income amount is listed below and W-2s have been included with this form. † <b>Parent 1: \$ _____ Parent 2: \$ _____</b>

STUDENT	
<b>2) Check one of the following:</b>	
<input type="checkbox"/>	I filed a 2020 Federal Tax Return. * <b>Circle one:</b> Tax Transcript/Return Enclosed <u>or</u> IRS DRT Used
<input type="checkbox"/>	I was not employed and had no earned income in 2020 and did not file a 2020 Federal Tax Return.
<input type="checkbox"/>	I did not file a 2020 Federal Tax Return but did work and/or have earned income. The earned income amount is listed below and W-2s have been included with this form. <b>Student: \$ _____</b>

➤ **Answer the following Federal Work-Study Question:**

Did you, the student, work on-campus and earn Federal Work-Study Dollars during the calendar year 2020?

Yes  No

**\*All tax filers must submit:**

**A 2020 Federal Tax Return Transcript OR**

**A 2020 1040 Tax Return (signed and dated) with Schedules 1, 2, and 3 OR**

**Use the IRS Data Retrieval Tool within the FAFSA.**

†Any parent that did not file a 2020 federal tax return must submit a Verification of Non-Filing Letter from the IRS.

- Federal Tax Return Transcripts are available on [irs.gov/individuals/get-transcript](https://www.irs.gov/individuals/get-transcript) or by calling 1-800-908-9946.
- Verification of Non-Filing Letters are available by completing an IRS Form 4506-T and submitting it to the IRS.

## E. Identity and Statement of Purpose

The student must provide the following to verify their identity either in person to Capital University's Financial Aid Office or in the presence of a notary:

- (a) A **copy of an unexpired valid government-issued photo identification (ID)** that is acknowledged in the notary statement below, such as but not limited to a driver's license, other state-issued ID, or passport;

**AND**

- (b) The **original notarized** Statement of Educational Purpose on the next page, if completed in the presence of a notary, or the Statement of Educational Purpose completed in person to Capital University's Financial Aid Office.

**\*\*\* If Statement of Purpose has been notarized, you must provide the original form. A faxed or emailed copy will NOT be accepted.**

**Please continue to next page.**

### Statement of Educational Purpose

(Statement must be completed in the presence of a Notary or in person to Capital University's Financial Aid Office)

I certify that I \_\_\_\_\_ am the individual signing this Statement of Educational Purpose and that the  
(Print Student's Name)  
 federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending  
**Capital University** for 2022-2023.

\_\_\_\_\_  
(Student's signature) (Date) (Student's ID number)

#### Notary's Certificate of Acknowledgement \*\*\*

State of \_\_\_\_\_ City/County of \_\_\_\_\_ on \_\_\_\_\_ (date), before me,

\_\_\_\_\_, personally appeared, \_\_\_\_\_, and provided to me  
(Notary's printed name) (Printed name of signer)

on the basis of satisfactory evidence of identification \_\_\_\_\_ to be the above-named  
(Type of government-issued photo ID provided)  
 person who signed the foregoing instrument.

**WITNESS my hand and official seal**

\_\_\_\_\_  
(Notary signature)

My Commission expires on \_\_\_\_\_ (Date)

**\*\*\* If Statement of Purpose has been notarized, you must provide the original form. A faxed or emailed copy will NOT be accepted.**

### ***F. Certification and Signatures***

By signing this worksheet, I certify that all the information reported on this worksheet is complete and correct. I agree, if asked, to provide documentation that will verify the accuracy of the information provided on this completed form.

**Warning: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.**

\_\_\_\_\_  
 Student Signature Date

\_\_\_\_\_  
 Parent Signature Date

\_\_\_\_\_  
 Parent's Spouse Signature (optional) Date

**Return this worksheet, and other documents to:**  
**Capital University Financial Aid Office**  
**1 College and Main, Columbus, Ohio 43209**  
**Phone: 614-236-6511**

**Do not email documents with personally identifiable information.**

**DO NOT COMPLETE - FOR OFFICE USE ONLY:** If verifying from a Federal Tax Return Transcript/Return.

	AGI	Taxes Paid	Tax-Exempt Int.	Untaxed IRA/Pension	Other Untaxed
Student					
Parent					
	IRA Deduct	Keogh/SEP	Edu. Credits	Pension Pay.	FWS Earnings
Student					
Parent					