

HOBART AND WILLIAM SMITH COLLEGES

**Graduate Student
Financial Aid
Application 2009-10**

DUE: June 1, 2009

Return to:
Office of Financial Aid Services and Student Employment
Hobart and William Smith Colleges
Geneva, NY 14456

Applicant's Legal Name _____ SS # _____

Home Address _____
Street City State Zip

Home Phone (____) _____ Cell / Work Phone (____) _____

INCOME INFORMATION	
<p>Student Status: <input type="checkbox"/> Filed or will file a 2008 Federal Income Tax Return (mail a <u>signed</u> copy to the Office of Financial Aid) <input type="checkbox"/> Not Required to File a 2008 Federal Income Tax Return Total Wages \$ _____ Work Study Earnings \$ _____</p> <p><small>If you did not keep a copy of the tax return, request a RTFTP printout or Letter 1722 from the Internal Revenue Service at (800) 829-1040 or request a copy of the tax return from your tax preparer.</small></p>	<p style="text-align: center;">Dollar Amounts of Non-taxable Income (Do Not Leave Blanks)</p> <p>Student Non-taxable Income</p> <p>Child Support Received _____</p> <p>Child Support Paid Out _____</p> <p>Social Security Benefits _____</p> <p>Welfare Benefits _____</p> <p>Housing Allowances _____</p> <p>Other Non-taxable Income _____</p>

HOUSEHOLD SIZE —List ALL family members including yourself who live with you and receive more than 1/2 of their support from you. Use additional paper if necessary.

Name	Age	Relationship	Name of College Attending 2009–2010 (at least half time)	College Enrollment (circle one)
				1/2 3/4 5/4
				1/2 3/4 5/4
				1/2 3/4 5/4
				1/2 3/4 5/4
				1/2 3/4 5/4
				1/2 3/4 5/4

SIGN THIS WORKSHEET

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

Student _____

Date _____