



Supplemental Application for Financial Aid 2014-2015

Student Name			Stonehill ID:			
	Last	First	Middle Initial			
Student Cell Numbe	r:		Cell Phone Carrier (i.e. AT&T):			
			ts must file the FAFSA by March 15, 2014 and the e not filed a CSS PROFILE form in a prior year, yo			
•		-	d return this form in PDF format to			
	<u>finaid@stonehi</u>	<mark>ll.edu</mark> (indicate s	tudent name and Stonehill ID in the subject line) or mail to			
Studen	t Financial Serv	ices, Stonehill Co	of man to ollege, 320 Washington Street, Easton, MA 02357	'-5312		
Late filers will recei	ve government	aid and instituti	onal grants and scholarships on a funds availabl	e basis only.		
			the student, and by your custodial parent(s). 1) where appropriate. Do not leave any item blank .			
		1. Custod	al Parent(s) Information			
together, regardless of -Your legal parents at time when not away a	your biological and of their gender; of their gender; of their gender; of their school; or the divorced or se	nd/or adoptive pa or lude the informat	rents) are married to each other or not married to e ion for the parent and stepparent you live with more he information for only the parent you live with more	e than 50% of the		
Parent 1□ / Steppare	ent 1 🗖 (check o	one)	Parent 2 □ / Stepparent 2 □ (check one)			
Name:			Name:			
Cell Phone:			Cell Phone:			
Street Address:						
Are your biological /	adoptive parents	s living with each	other? Yes 🔲 No 🗖			

2. Household Information

List below all persons who are living in your custodial parents' household. If more than 6 people, attach a separate page.

- Your custodial parent(s), and
- Your custodial parents' other children if your parent(s) will provide more than half of their support between July 1, 2014 and June 30, 2015 or if the other children would be required to provide information about your custodial parent(s) when completing the FAFSA for 2014-2015, and
- Other people if they now live with your parents and your parents provide more than half of their support and will continue to do so from July 1, 2014 through June 30, 2015.

Full Name	Relationship to Student	Date of birth	College this person will attend in academic year 14-15, if any	Number of courses per semester in 14-15	Student Enrolled in Graduate School (Yes or No)
1. You, the student			Stonehill College		
2.	Parent 1/Stepparent 1				
3.	Parent 2/Stepparent 2				
4.					
5.					
6.					

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Property Description	Principal Residence ☐ Rent ☐ Own (check one)				Other 1**		Other 2**	
Address								
Current resale value								
Balance of mortgage(s)								
Year of purchase								
Purchase price								
**Other 1, 2 includes inversely properties are owned, please depreciation claimed of the second of t	ease include the on your 2013 fede	details on a separat eral tax return (Sch	te page. iedule E)	for any rent	al property l	isted above	? Ye	
		4. Incom	e and B	enefits				
Source of Income or Be		nter (Ø) if applica	ıble.	S	tudent		F	arent
Child support received (t	otal for ALL child	dren in household)		\$		\$		
Worker's Compensation				\$		\$		
Untaxed contributions to	retirement – Re	fer to W-2s, Boxes	12a	\$		\$	\$	
through 12d, codes D,E,								
Welfare benefits (e.g. TAI Security Benefits	NF, AFDC or ADC) and untaxed Soci	al	\$		\$		
Earned Income Credit (10 38a, 1040EZ line8a)	040 line 64a, 104	0ez line 8a, 1040A	line	\$ \$				
Additional Child Tax Cred	dit (1040 line 65,	1040A line 39)		\$		\$		
Is either parent the be	neficiary of a trus	st? Yes 🗖 No 🗖	Is t	he student t	he beneficiar	y of a trust?	Ye	s 🗆 No 🗅
J (1)		5. Custodial Paren						
Is either parent self-empl	oyed? Yes 🖵 No	o 🗀 💮 If yes, plea	ise comp	lete the folio	owing inform	ation.		
Name of Business:		_ Type of Busines	ss Returi	n Filed: □10	65 □ 1120	S □1120	□So	hedule C
If there is more than 1 bu	siness, please inc	clude these details	on a sen	arate page. (Include stud	ent ID and r	name)	
Name of all owners, inclu	uding parent(s) % owned by Relation			nship of other owners to		Value	of	Debt of
		this owner		yourself		Busine \$	ess	Business
						T		*
Did/will parent claim exp 1120, or 1120S? Yes □		avel, meals, busines f yes, what is the co						
			ombined	total of thes				
1120, or 1120S? Yes 🗖	No 🗖 I	f yes, what is the co	ombined ation Sta	total of thes	e expenses a	nd deprecia	tion \$	
	No 🗖 I	f yes, what is the co	ombined ution Sta	total of thes tements ge before you	e expenses a	nd deprecia	tion \$	aid.
1120, or 1120S? Yes 🗖 This Supplemental Applica	No Is ation is required	f yes, what is the confidence of the submitted to the ege or the Federal Go	ombined ation Sta the Colle	total of thes tements ge before you , you will be re	e expenses a	nd deprecia dered for fin	tion \$ nancia	aid.