



2019–2020 Parent Additional Financial Information Form

Your FAFSA application was selected by the U.S. Department of Education for review after comparing your parent(s) 2017 Adjusted Gross Income and other financial information. BRCC is required by federal law to compare the FAFSA with the information on this worksheet. You, your parent, **and** parent's spouse if married, must complete this form. You and your parent must sign and submit the form to the Financial Aid Office to determine eligibility for federal student aid. **Incomplete forms or conflicting information will cause delays in the processing of your aid.** Instructions for looking up your Student I.D. can be found here: [Find your student ID here.](#)

A. Student Information

Last Name: _____ First Name: _____

Student ID (required): _____ Date of Birth: _____ Phone Number: _____

B. Additional Financial Information:

Report total annual amounts for 2017. If an item does not apply use "0" or "N/A." Additional Financial Information to Verify:	Parent(s) Total 2017 Amount:
Education credits (American Opportunity Tax Credit and Lifetime Learning Tax Credit). Amount found on IRS Form 1040 – line 50 or IRS 1040A – line 33.	\$ _____
Child Support Paid. List amount paid due to a divorce or separation as a result of a legal requirement. Don't include support for children included in parent's number in household. Child or children support is paid for: _____ _____ Adult support is paid to: _____	\$ _____
Taxable Earnings from Need-Based employment programs. Include amounts from Federal Work-Study, and assistantships or fellowships, if they are need-based.	\$ _____
Taxable college grant and scholarship aid, only if it was reported to the IRS in your Adjusted Gross Income. Include amounts from AmeriCorp benefits (awards, living allowances, and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.	\$ _____
Combat pay or special combat pay. Only enter the amount that was taxable and included in the Adjusted Gross Income on the 2017 tax form filed. Don't include untaxed combat pay.	\$ _____
Earnings from work under a cooperative education program offered by a college.	\$ _____

C. Certification and Signatures

The student and the parent for whom information is provided above **MUST** sign and date this section in blue or black ink. Each person signing below certifies that all the information reported on this form is complete, correct, and any additional information is attached, if necessary. **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: _____

Please return this completed form in one of the following ways: upload it using the link to the form on your To-Do list in SIS, fax to 540-234-8189, scanned e-mail attachment to finaid@brcc.edu, or mail to Blue Ridge Community College, Office of Financial Aid, Box 80, One College Lane, Weyers Cave, VA 24486. Please call 855-844-3631 if you have questions.