



# COLLEGE OF THE ATLANTIC

105 Eden Street Bar Harbor, ME 04609

## 2016-2017 APPLICATION FOR FINANCIAL AID

### Instructions

- In order to be considered for both federal and institutional aid at College of the Atlantic you must complete this form AND the Free Application for Federal Student Aid (FAFSA [www.fafsa.gov](http://www.fafsa.gov)).
- Priority filing deadline is February 15, 2016 for Regular Admission.
- **If a question does not apply, put "N/A" or "0" in the answer space. DO NOT LEAVE BLANK ANSWERS.**
- Return this application (no later than February 15) as well as copies of 2015 federal income tax returns to the Financial Aid Office by mail or fax (207.288.4126).

### Additional Information and Supplemental Forms

- If your parents are divorced or separated, the parent you live with completes the "Parents" sections of this form (**this must include a step-parent's information in the case of a remarriage**).
- The noncustodial parent must complete the *COA Noncustodial Parent Declaration of Finances* form, which can be downloaded at <http://www.coa.edu/coa-forms.htm> if needed, and submit a copy of their 2015 federal tax return.

### Name and Address of Applicant (please print)

First \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_

Street or P.O. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ email \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security # \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Please check one of the following: New applicant \_\_\_\_\_ Transfer applicant \_\_\_\_\_ Returning student \_\_\_\_\_

For which term are you applying? Fall 2016 \_\_\_\_\_ Winter 2017 \_\_\_\_\_ Spring 2017 \_\_\_\_\_

**1. Parents' Information:** If your parents are divorced, separated or unmarried, the parent who you live with completes the "Parents" sections of this form; this must include a step-parent's information in the case of a remarriage.

(Circle one) Stepfather's//Father's name \_\_\_\_\_ Age \_\_\_\_\_

(Circle one) Stepmother's//Mother's name \_\_\_\_\_ Age \_\_\_\_\_

Street address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Father's Occupation/Title \_\_\_\_\_ Employer \_\_\_\_\_

Mother's Occupation/Title \_\_\_\_\_ Employer \_\_\_\_\_

### **2. a) Student's natural or adoptive parents are:**

☐ Married ☐ Separated ☐ Divorced Date of divorce or separation \_\_\_\_\_  
☐ Never Married ☐ Widowed

b. Name of person who claimed student as a dependent on most recent U.S. income tax return \_\_\_\_\_

**3. If student's natural or adoptive parents are divorced, separated or unmarried, please provide the following information:**

Year of separation \_\_\_\_\_ Year of divorce \_\_\_\_\_

Other parent's name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box City State Zip

Phone: (\_\_\_\_\_) \_\_\_\_\_

Occupation: \_\_\_\_\_

**4. Household Information**

- List ALL family members who are included in parents' household **that will receive more than half their support from your parents** between July 1, 2016 and June 30, 2017.
- Include YOURSELF
- Include your PARENT(s)

List all household members. (List student applicant first; include custodial parent[s]).	Age	Name of College 2016-2017; <b>enter COA for yourself</b>	Year in college	Check appropriate Box		
				full-time	half-time or more	less than half-time

**5. Do parents own home?** Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please indicate:

Year purchased \_\_\_\_\_ Purchase Price \$ \_\_\_\_\_

What is it worth now? \$ \_\_\_\_\_ How much is owed on it? \$ \_\_\_\_\_

Parents' monthly home mortgage or rental payment \$ \_\_\_\_\_

**6. Untaxed Income**

Please Note: On the FAFSA, there are questions about untaxed income. This category of "Other Untaxed Income" seems to be an area where many families make errors in the financial aid application process. The following questions ask you to list common sources of untaxed income. Please refer to 2015 income information and the FAFSA.

**If you did not receive income write "0".****DO NOT LEAVE BLANK ANSWERS.**

	Students	Parents
Payments to tax-deferred pension plans such as 401(K) or 403(B)	\$ _____	\$ _____
Deductible IRA/Keogh Payments	\$ _____	\$ _____
Housing or living allowances paid to military, clergy, and others including cash payments and cash value of benefits	\$ _____	\$ _____
Child support received	\$ _____	\$ _____

Enter ANNUAL amounts!

## 7. Student applicant information

Does student own car? Yes ☐ No ☐

If yes, please complete the information below:

Year/Make/Model of Automobile	Purchase Price	Date of Purchase	Current Value
	\$		\$

Are you the beneficiary of any trust(s)? Yes\* ☐ **\*Send copy of most recent 1041** No ☐

Established by \_\_\_\_\_ When? \_\_\_\_\_ Type of trust \_\_\_\_\_ Total value: \$ \_\_\_\_\_

Are you a citizen of the United States? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, what is your country of citizenship? \_\_\_\_\_

Your Visa Status? \_\_\_\_\_ Your alien registration number? \_\_\_\_\_

**8. Please list any expected financial assistance from other sources** (faculty/staff tuition grants, outside scholarships). List type of aid and amounts below. Include **ANY** and **ALL** scholarships that you have applied for *or plan to apply for* even if you have not received a response yet. You are legally responsible for reporting all outside scholarships to your school whether listed here or not. To maximize your benefits, report final scholarship information to COA by July 1 (please provide copy of award letter/check). Include any anticipated VA benefits.

- |    |    |
|----|----|
| 1) | 4) |
| 2) | 5) |
| 3) | 6) |

## 9. Comments

Please use this space and any additional pages, if necessary, for comments you may wish to add.

## STATEMENT OF UNDERSTANDING

I/we understand that information provided on this and other documents may be shared with the applicant, with other schools and agencies from which we are requesting aid, and with colleges in which other family members are enrolled; biographical data may be shared with donors if aid is offered and accepted.

I/we certify that all information presented here is correct at this time, and that we will update of any changes in family income or assets, in family situation, in the college plans of other family members, or of the receipt of other scholarships or grants as soon as known.

Signature of Parent(s) or guardian(s) \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Signature of student applicant \_\_\_\_\_ Date \_\_\_\_\_

## FINAL CHECK

- Did you list yourself and your parent(s) in Part 4, Household Information?
- Did you leave any blank answers? If so, please fill them in as requested.  
Use "N/A" or "0" if necessary.
- Remember to follow up and provide final information about all outside scholarships to COA by July 1.
- Be sure to provide copies of 2015 taxes.