# 2021-2022 Aid for Part-time Study Program (APTS) Policy Application Deadline- February 25, 2022

#### **Enrollment Status, Program of Study, Maintenance of Award, Additional Tuition Benefits**

- Students must have completed the 2021-2022 FAFSA form BEFORE any APTS award will be determined.
- Students must be registered for at least 3 credit hours but less than 12 credit hours per semester.
- Developmental courses (credit equiv. courses) are eligible for funding based on placement scores if the student is additionally enrolled in at least 3 credit bearing hours.
- Courses beginning after fourth week of the semester (late starting courses) are not eligible for APTS funding.
- Awards will not be granted for coursework that does not apply to your degree program.
- Changes in coursework (adding and/or dropping courses) after an award has been processed could result in a reduction or cancellation of the APTS award.
- If there is a <u>COMPLETE WITHDRAWAL</u> from classes PRIOR TO THE OFFICIAL CERTIFICATION OF THE APTS AWARD (the end of the semester), the award may be adjusted or cancelled accordingly. The student may then be responsible for payment of the tuition previously covered by the APTS award and/or repayment of excess funds disbursed to the student.
- If the student receives additional third party or state funding (e.g. employer tuition benefit, NYS Educational Incentive Program), it may reduce or cancel the APTS award amount.

The maximum award per semester is \$1000. Your award will be based on your enrollment status; that is, the number of credit hours that apply to your degree or program requirements.

#### **Income Limits**

- Dependent Student: taxable income\* of student and parent cannot exceed \$50,550
- Independent Student without Dependents: taxable income\* of student and/or spouse cannot exceed \$34.250
- <u>Independent Student with Dependents</u>: taxable income\* of the student and/or spouse cannot exceed \$50,550

\*Taxable income is taken off the NYS Tax return- it is not the same as AGI on federal return. Taxable income also includes any state, local and federal pension income.

### **Academic Progress Requirements**

 Students must meet NYS and CCC academic progress requirements each semester in order for APTS funding to continue at CCC.

#### AND

 Students who receive APTS funding but fail to complete the semester with a semester grade point average of 1.0 or higher are not eligible to receive APTS funds in future semesters at CCC.

#### **APTS Application Process**

Complete the NYS APTS Application, attach appropriate documentation (2019 NY State Tax Returns) and provide signatures from all individuals reporting income.

#### Submit to:

Corning Community College Financial Aid Office 1 Academic Drive, Corning, NY 14830 Fax (607) 962-9019

Use the secure upload link in MyCCC on the student tab in the Financial Aid and Student Accounts Resources box.

APTS awards are based on the above requirements as well as those listed on the actual application & mandated by NYS HESC.

#### Instructions for Preparing an Application for Aid for Part-Time Study

WHAT IS APTS? The AID FOR PART-TIME STUDY program is a grant program financed by New York State in conjunction with participating educational institutions throughout the state. The program provides up to \$2,000 per year to help part-time undergraduate students meet their educational expenses.

#### WHO IS ELIGIBLE FOR APTS?

To be considered for an APTS award, a student must:

- Be a United States citizen or eligible noncitizen
- Be a legal resident of New York State
- Have graduated from a high school in the United States, earned a GED, or passed a federally approved "Ability to Benefit" test as defined by the Commissioner of the State Education Department
- Be enrolled as a part-time student
- Be matriculated in an approved program of study in a participating New York State secondary institution
- Be in good academic standing; Have achieved at least a cumulative "C" average after having received the equivalent of two full years of payment of state-sponsored student financial aid.

#### WHAT ARE THE INCOME LIMITS?

Income means the taxable income as taken from the New York State income tax return plus any state, local or federal pension income.

- If you were claimed as a tax dependent by your parents, family income (i.e., taxable income of student and parents) cannot exceed \$50,550.
- If you were not eligible to be claimed as a tax dependent by your parents, income (i.e., taxable income of student and/or spouse, if married as of December 31st) cannot exceed \$34,250.
- If you were not eligible to be claimed as a tax dependent by your parents but you were eligible to claim dependents of your own other than yourself and/or your spouse, income (i.e., taxable income of student and spouse) cannot exceed \$50,550.

#### HOW DOES A STUDENT APPLY FOR AID FOR PART-TIME STUDY?

Complete the application using these instructions. Mail or bring the completed application to your school's financial aid office. Do not return the application to Higher Education Services Corp. This will delay consideration of your application.

Read the instructions before making any entries. If you need further help, or if you need clarification of a particular issue, contact your Financial Aid Officer.

1-4. SOCIAL SECURITY NUMBER, DATE OF BIRTH, NAME, ADDRESS, EMAIL ADDRESS. Enter all the information requested.

#### 5. NEW YORK STATE RESIDENT.

Check YES if any of the following apply to you...

- you now reside in New York State AND will be an undergraduate AND you lived in New York State for the last 2 terms of high school, or
- you were a legal resident when you entered military service, Vista or Peace Corps AND have reestablished New York State residency within 6 months after release from such service, or
- you have resided in New York State for at least 12 months immediately preceding the first term for which you are seeking aid AND have established domicile (permanent residence) in New York State.

#### Check NO if...

- you are financially dependent on your parents and neither of them is a New York State resident, or
- your parents are separated or divorced and the parent with whom you are living is not a New York State resident, or
- you reside in New York State for the sole purpose of attending college, or
- none of the above conditions apply to you.
- 6. UNITED STATES CITIZENSHIP OR ALTERNATE REQUIREMENTS. Check the box that applies to you. You must check one of the three boxes. Proof of your status may be required.
- Be charged at least \$100 tuition per year
- Not have exhausted Tuition Assistance Program (TAP) eligibility
- Not be in default on a student loan guaranteed by HESC or on any repayment of state awards
- Meet income eligibility limitations

In addition to the above, students who received a state-sponsored award for the first time in the 1996-97 academic year and thereafter must be a high school graduate, or receive the equivalent of a high school certificate, or receive a passing grade on a federally approved examination.

#### NOTE:

- If the student is a member of the armed forces who is not a legal resident of New York State but who is stationed on full-time active duty in New York State, the residency requirement is waived effective with the 2005-06 academic year. To qualify for the waiver, the student must submit official documentation confirming full-time active duty status and duty station.
- If the student is the spouse or dependent of a member of the armed forces who is not a legal resident of New York State but who is stationed on full-time active duty in New York State, the residency requirement is waived effective with the 2005-06 academic year. The student must submit official documentation confirming both full-time duty status and duty station of the member of the armed forces and the student's status as spouse or dependent of that person.

- 7-8. MARITAL STATUS. Check the box that applies to you. If you were married as of December 31st, you must report income information for your spouse in question 11. Enter the month and year you were married or, if separated/divorced or widowed, give earliest date on which you were separated/divorced or widowed. If you are other than SINGLE, enter your spouse's Social Security Number in item 15. (NOTE: Any separation must be by judicial decree or pursuant to an agreement which is filed by a court of competent jurisdiction.)
- 9. CHECK "YES" if you have graduated or will graduate from high school or if you received or will receive a General Education Development (GED) certificate. You may also check "Yes" if you received a passing score on a federally approved examination which demonstrates your ability to benefit from the education being offered. Otherwise, check "No."
- 10. EMPLOYER REIMBURSEMENT. Awards under this program are limited by the actual tuition paid by the student. In considering a student for an award, the institution must take into account other sources of financial aid available.
- Check YES If your employer has paid, or will reimburse, all or part of your tuition for the term(s) for which this application for APTS is made, and enter amount of reimbursement, if known.
- Otherwise, check NO.
- 11. ENTER YOUR INCOME IN THE BOXES PROVIDED.

#### 12. WERE YOU CLAIMED AS A TAX DEPENDENT?

- Check YES and report your parents' income on page 2 of the application if you were claimed as a dependent on your parent's tax return.

#### 12. WERE YOU CLAIMED AS A TAX DEPENDENT? cont.

- Check NO and sign the affirmation on page 2 of the application if you were not eligible to be claimed as a dependent by your parents. (If married, your spouse must also sign the application.) If you have checked NO but have dependents of your own other than your spouse, also check the second box as indicated.

NOTE: If you were not claimed as a tax dependent on your parent's tax return, you must still report your parents' income in question 14 if you could have been claimed but were not. The criteria for determining whether or not you could have been claimed are detailed in the instruction booklet for filing state and federal tax returns.

Generally, you were eligible to be claimed as a dependent if:

- you were single, and
- your parent or parents provided more than one-half of your support in the previous year, and your gross income was less than \$3,000. If your income was more than \$3,000, you could still have been claimed if you were under 19 years of age or you were under 24 years of age and a full-time student.
- 13. EXCLUSION OF PARENTS' INCOME. Report in question 14 the income of the parent with whom you lived most last year or who had custody or would have had custody if you were a minor.

The income of a parent can be excluded in the cases of death, divorce or separation which occurred before December 31st. You should check the appropriate box in question 13 and enter the date and amount of support received on your behalf. (NOTE: Any separation must be by judicial decree or pursuant to an agreement of separation which is filed by a court of competent jurisdiction.)

- 14. PARENTS' INCOME. The instructions for reporting income information are the same as appear in question 11. Report the following incomes: Parent 1's income and Parent 2's income. If you excluded the income of one parent in question 13, report the income of the other parent in question 14. In addition, enter Social Security Numbers as appropriate in the AFFIRMATION Section.
- 15. AFFIRMATION. You MUST sign the application. In addition, if you are married, your spouse must sign and give his/her Social Security Number. If your parents were required to provide income information in question 14, they must sign and give their Social Security Numbers and the first three letters of their last name.

In signing this AFFIRMATION you are acknowledging that you have read, understood and accepted the conditions described in the AFFIRMATION appearing on the application form.

#### DISCLOSURE OF SOCIAL SECURITY NUMBERS

Disclosure of your Social Security Number and the Social Security Numbers of members of your family is mandatory and has been authorized by NYS Education Law § 661 subdivision (2). We need these numbers to verify your identity, to process your application, to keep track of your records and to verify reported incomes from the New York State Department of Taxation and Finance.

#### NO DISCRIMINATION ON THE BASIS OF DISABILITY

We do not discriminate against handicapped persons in our employment practices or in the administration of our programs, activities or services.

H8083B (Rev. 06/2009)

## **Aid for Part-Time Study** (APTS) Application Academic Year 2021-2022

Submit complete application to the Financial Aid Office. Incomplete applications will be returned. SCHOOL NAME: Corning Community College

1. Social Security Number	2. Date of Birth (Use numbers only)			
	Mo. Day	Year (CCYY)		
3. Last Name	First Name		MI	
<b>4.</b> Address: number, street, apartment	City or Town	State		Zip Code
Home Phone NumberWork Ph	hone Number	_		
Email address				
5. Are you a legal resident of New York State? (See in acceptable residency requirements listed on page 1.)	Yes No	n IT-203, provide o	locumentat	ion indicating you meet one o
6. Check the box that applies to you.  Citizen Eligible Non-Citizen	Not a Citizen or Eliş	gible Non-Citiz	en	
7. Marital Status (check one box) Unmarried	d (single, divorced or widow	ed) M	arried	Separated
3. If married, enter the date you were married. If separated/divorced or widowed.   //	CCYY)			·
10. Will all or part of your tuition charges be paid or r		Yes	No	
If yes, enter amount if known \$*  *PLEASE ATTACH A CURRENT COPY OF YOU		FIT POLICY*		
APPLICANT/SPOUSE (IF MARRIED) INCOME 11. Enter 2019 NYS exemptions and Net Taxable Incomentation in the syour combined taxable income and right information (Form IT201), NOT information for the syour combined taxable income and right information for the syour combined taxable income and right information for the syour combined taxable income and right income an	ome (NTI) in boxes provided EQUIRED PENSION AND ANNU ROM YOUR FEDERAL RETURN	l. Enter you jity income, i	R EXEMP N THE BO	TIONS AND INCOME, OXES PROVIDED. USE I
Applicant's Separate NTI OR Joint NTI with Spous	se Spouse's Sep	arate NTI Only	7	
	Exemptions		Income	
Exemptions Income .00				.00

12. Were you eligible to be claimed as a dependent on your paren	nts' New York State or federal tax return for the previous year?
1 Yes – if yes, YOU MUST REPORT PARENT No – if no, read and sign the affirmation on the	
If you answered "YES" to question 12, that is, you were claimed or were in question 14. If your parents (stepparents, adoptive parents) filed a tax	e eligible to be claimed as a tax dependent, you must report parental income a return as married, you must report total income for both parents.
question 14 the income of the parent with whom you lived most in minor. TO EXCLUDE THE INCOME OF Parent 1 OR Parent 2	e divorced, separated, never married or one of your parents is deceased, report in the previous year or who had custody or would have had custody if you were a give the reason by checking the appropriate box. Enter the date of death or arated/divorced. Only one parent's income can be excluded for separation/divorce.
To exclude <b>Parent 1's</b> Income 1 Parent 1 decease 2 separated or di	
To exclude <b>Parent 2's</b> Income 1 Parent 2 deceared separated or discounts.	
Support Amount – Enter the amount of support received for <b>If none, enter zero.</b> (Note: Any separation must be by judicial decre of separation which is filed by a court of competent jurisdiction.)	
NYS 2019 IT201 information, NOT information from fe	D NET TAXABLE INCOME (NTI) IN THE BOXES PROVIDED. <mark>Use</mark> deral return <mark>.</mark>
* <u>ATTACH A COPY OF YOUR PARENT</u> (	(s) 2019 NYS return(s) with this application*.
Parent 1's Separate NTI OR Joint NTI with Parent 2	Parent 2's Separate NTI Only
Exemptions Income .00	Exemptions Income .00
NOTE: If YOUR PARENT(S) WERE NOT REQUIRED TO FILE A 2019  NOT REQUIRED TO FILE A 2019 NYS INCOME TAX RETURN -  Parent 1's signature	9 NYS INCOME TAX RETURN, INDICATE THAT BELOW: I WAS  Parent 2's signature
accepted for all purposes as the equivalent of an affidavit and if it chad been duly sworn. I authorize the school to consent release to I pertinent to this application. I consent to the verification by HESC	ed by me upon this application is accurate and complete. This information will be contains a false statement, shall subject me to the same penalties for perjury as if I Higher Education Services Corporation (HESC) any information requested C of any statement made herein and authorize the NYS Department of Taxation and e tax returns. I consent to the release by HESC of such information as may be
Student's Signature Date	
Student's Spouse's Signature (if required)  Date	Spouse's SSN
Parent 1's Signature (if required)  Date	Parent 1 SSN First 3 letters of Parent 1's Last
	Parent 2 SSNFirst 3 letters of Parent 2's Last Name
Parent 2's Signature (if required)  Date	
BRING, MAIL, FAX OR UPLOAD THE COMPLETED A	APPLICATION <u>&amp; ATTACHMENTS</u> TO THE FINANCIAL AID OFFICE.