



Office of Student Financial Aid

			С
Last Name	First Name	M.I.	BRCTC ID number
Email Address			Phone Number (include area code)
			☐ Mobile/Cell Phone ☐ Landline/Other
Household Info	rmation		

Independent Student	Dependent Student
You should list the following people within your household for whom you will provide more than half of their support between July 1, 2020 and June 30, 2021.	You should list the following people within your parent's household for whom your parent(s) will provide more than half of their support between July 1, 2020 and June 30, 2021.
 Yourself and Your spouse, if you are married and Your children and Other people if they now live with you 	 Yourself and Your parent(s) (including a stepparent) even if you do not live with your parents and Your parent(s) other children and Other people if they now live with your parent(s)

Include the name of the college for any household member, who will be enrolled, at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2020, and June 30, 2021.

Full Name	Age	Relationship	College Name	Will Be Enrolled at Least ½ Time?
John Smith (example)	29	Husband	Example University	Yes
		self	Blue Ridge CTC	

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Federal Tax Return Filing Status

Refer to the "2020-2021 Verification Information" if you are unsure how to answer the following questions. If you did not receive a copy, this information can be found online at http://www.blueridgectc.edu/financial-aid/verification/

Student (& Spouse) Filing Status (all students)	Parent(s) Filing Status (dependent students only)
☐ I have already filed my 2018 return and ☐ used the IRS Data Retrieval Tool via the FAFSA (preferred method) or ☐ am submitting a signed copy of my 2018 IRS Tax Return with schedules 1-3 or 2018 IRS Tax Transcript	☐ I have already filed my 2018 return and ☐ used the IRS Data Retrieval Tool via the FAFSA (preferred method) or ☐ am submitting a signed copy of my 2018 IRS Tax Return with schedules 1-3 or 2018 IRS Tax Transcript
□ I had to amend my 2018 return so I am submitting a signed copy of my 2018 IRS 1040X form filed with the IRS and: □ I have used the IRS Data Retrieval Tool via the FAFSA (preferred method) or □ am submitting a copy of my 2018 IRS tax return transcript showing original return data (comes directly from IRS)	☐ I had to amend my 2018 return so I am submitting a signed copy of my 2018 IRS 1040X form filed with the IRS and: ☐ I have used the IRS Data Retrieval Tool via the FAFSA (preferred method) or ☐ am submitting a copy of my 2018 IRS tax return transcript showing original return data (comes directly from IRS)
I was not employed and had no income earned in 2018 (If independent student, MUST attach Verification of Non-Filing from IRS dated after 10/1/19)	☐ I was not employed and had no income earned in 2018 (If independent student, MUST attach Verification of Non-Filing from IRS dated after 10/1/19)
I will not and am not required to file , but in 2018, I earned \$ from work (MUST attach all 2018 W-2's AND Verification of Non-Filing from IRS dated after 10/1/19)	☐ I will not and am not required to file , but in 2018, I earned \$ from work (MUST attach all 2018 W-2's AND Verification of Non-Filing from IRS dated after 10/1/19)

High School Completion Status

Select the option that applies to you:

I have already provided either a copy of my official high school transcript, home school verification, or GED to Admissions.
I was a transfer student to Blue Ridge CTC and was not required to supply a copy of my official high school transcript, home school verification, or GED for Admission purposes. I am providing the Financial Aid Office with a copy of it now for verification of financial aid.
I am a non-degree seeking student and am now providing the Office of Financial Aid with a copy of either my

official high school transcript, home school verification, or GED.

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Last Name	First Name	M.I.	BRCTC ID Number
Student's I	Educational Purpose		
_	COVID-19 pandemic, the need to sign	n this in our office	has been waived by the Department of Education. Please complete
"[certify that I(Print Stude	ent's Name)	am the individual signing this Statement of
Ed	ucational Purpose and that the Fo	ederal student fi	nancial assistance I may receive will only be used
for	educational purposes and to pay	the cost of atte	nding Blue Ridge CTC for 2020-2021."
Student Sigr	nature		Date
Student ID I	Number		
Student's	<u>Identity</u>		
identificatio		ber, you must fax	nt issued documents along with this form. Please note: if your or mail the documents to us (we will NOT be able to accept any
** Military I	D card is not acceptable documenta	tion for this purpo	se.
	Driver's License Photo Identification Card Passport Other:	_	
	n Statement: By signing this worksh r federal student financial aid, is com		hat all of the information reported above, used to determine
WARNING:	If you purposely give false or mislea	ding information o	on this worksheet, you may be fined, sentenced to jail, or both.
 Student Sigi	nature – in ink, typed signature not a	 accepted	Date
Parent Signa	ature (If dependent student) – in ink, signature n	typed ot accepted	Date

Deadline Fall: Nov. 20, 2020 Spring: May 7, 2021 Summer: July 23, 2021

To return this form, please visit in person:

Mail: Office of Student Financial Aid, 13650 Apple Harvest Drive, Martinsburg, WV 25403

Fax: 304.260.4376 Email: finaid@blueridgectc.edu