

This form is needed only if parents cannot submit data jointly on the electronic application. The parent who claims the dependent child as a dependent for tax purposes must provide the data on the electronic application. Upload the form, along with all other required documents, as part of your application no later than **3:00 p.m. Central Time on April 25, 2019.**

**A. STUDENT INFORMATION**

Last name \_\_\_\_\_ First name \_\_\_\_\_ App ID#: \_\_\_\_\_  
 Permanent mailing address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP code \_\_\_\_\_

**B. PARENTS' INCOME, EXPENSE, AND ASSET DATA**

The applicant's parent(s) must complete the following section using data from the most recently completed tax return.

1. State of Residence ..... \_\_\_\_\_
2. Adjusted gross income (FORM 1040) ..... \$ \_\_\_\_\_
3. Total federal tax paid (FORM 1040) – not the amount withheld from paychecks ..... \$ \_\_\_\_\_
4. Total income of parent/guardian ..... \$ \_\_\_\_\_  
 Total income of applicant's other parent/guardian ..... \$ \_\_\_\_\_
5. Yearly untaxed income and benefits: Please indicate source  
 Social Security  Child Support  Other \_\_\_\_\_ \$ \_\_\_\_\_
6. Medical and dental expenses not paid by insurance (exclude premiums) ..... \$ \_\_\_\_\_
7. Total cash, checking, savings, cash value of stocks, etc. (exclude retirement plan funds, IRA, 401k)..... \$ \_\_\_\_\_
8. Total number of family members living in the household and primarily supported by the reported income ..... # \_\_\_\_\_
9. Marital status of parent or guardian:  Single  Married  Separated  Divorced  Widowed
10. Of the total number of family members on line 8, number of students attending college at least half time during the 2019-20 school year (include applicant, exclude parents). # \_\_\_\_\_

**C. CERTIFICATION AND SIGNATURES**

**Certification:** All information provided is complete and accurate to the best of my (our) knowledge. If requested by an authorized official of Scholarship America, I (we) will provide proof of information including a copy of my (our) most recently filed U.S. and/or state income tax return. Falsification of information or refusal to provide information may result in rejection of this application or termination of any award granted.

\_\_\_\_\_  
 Student's Signature

\_\_\_\_\_  
 Parent's Signature

\_\_\_\_\_  
 Print Parent's Name

\_\_\_\_\_  
 Date Completed