



2020-2021 Aid for Part Time Study

Application Deadlines:

Spring 2021: March 30, 2021

- You must complete pages 1 through 4 of this application, print and sign where indicated.
- Read and check ALL Certification Statements below.
- Read and complete the APTS Eligibility Requirements on page 2.
- Submit signed copies of your 2018 New York State Tax Return (Form IT201 or IT203). Dependent students must also submit signed copies of their parents' 2018 New York State Tax Return. If a New York State return was not filed, submit a signed copy of the appropriate 2018 Federal Tax Return. All signatures are required and must be provided in the appropriate space on page 4 of the tax return.
- Return all of the above documents to the Financial Aid Office in Guenther 110.
- If your application is incomplete it cannot be reviewed for eligibility.

CERTIFICATION STATEMENTS

- I have read and understand the Aid for Part-Time Study Application, Instructions and Eligibility Requirements. By signing this form, I am stating that, to my knowledge, I have completed the process and meet all of the eligibility requirements.
- I understand that awards will be determined and confirmed in writing. This confirmation will occur no earlier than the 10th week of classes each semester but could be later due to processing time.
- I understand that if I owe a balance on my tuition, my APTS award will pay the amount due to Hudson Valley Community College. If I am due a refund, it will be issued to me within 45 day after I am notified in writing of my award.
- I understand that I may not receive more than one state grant in any given semester (i.e. TAP, Part-Time TAP OR APTS). I confirm that this application for APTS authorizes Hudson Valley Community College to decertify any other award I may qualify to receive.
- I understand that the total amount of financial aid assistance (i.e. grants, scholarships, student loans, tuition assistance) I receive cannot exceed my Cost of Attendance (COA). I will consult with the Financial Aid Office before accepting this award to ensure I fully understand the impact it may have on my financial aid package.
- I understand that if I am awarded APTS it will be factored in to my COA and that the Financial Aid Office may have to adjust other forms of financial aid on my account to avoid over-awarding me.
- If I choose to rescind my APTS application, I will notify the Financial Aid Office in writing before the end of the term.

| | |
|-------------------|------|
| Student Name | SSN |
| Student Signature | Date |

HVCC Financial Aid Office
 80 Vandenberg Ave
 Troy, NY 12180

Phone 518-629-7150
 Fax 518-629-7479
financialaid@hvcc.edu

Guenther Room 110
 Monday-Friday
 8AM-5PM

2020-2021 AID FOR PART-TIME STUDY (APTS)
ELIGIBILITY REQUIREMENTS

I understand that in order to qualify for Aid for Part-Time Study, I must:

1. Have a valid and signed 2020-2021 Free Application for Federal Student Aid (FAFSA) on file with HVCC by the APTS application deadline.
2. Be a legal resident of New York State, and a United States Citizen or eligible non-citizen.
3. If required, I must pass an approved Ability to Benefit (ATB) placement test prior to the end of the add/drop period for the semester.
4. Be a matriculated student in an approved degree program.
5. Be registered in 6 to 11 degree applicable semester credit hours. If I am registered for at least 3 credit hours, I may be considered for an award, if funding permits. I understand that priority is given to students registered for at least 6 credit hours. I also understand that I do not qualify for APTS for remedial, sprint or courses I am repeating.
6. Have achieved an overall cumulative Grade Point Average (GPA) of 2.00 or better.
7. Complete at least 50% of the minimum part-time load in each term of study for the first year, 75% in the second year and 100% in the third and succeeding years for which an APTS award is received.
8. Meet the Good Academic Standing requirements as published in the Hudson Valley Community College Catalog and website.
9. Have not exceeded the income limits, as listed on the “Instructions for Preparing an Application for Aid for Part-Time Study” in this packet.
10. Not have exhausted my Tuition Assistance Program (TAP) eligibility.
11. Continue to participate in classes.

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| Student Name: |
| Phone Number: |
| Address: |

Aid for Part-Time Study (A.P.T.S.) Application

Academic Year 2 0 2 0 2 1

Submit this completed application to your school's Financial Aid Office.

Hudson Valley Community College

SCHOOL NAME

1. Social Security Number

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2. Date of Birth (Use numbers only)

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Month Day Year (CCYY)

3. Last Name

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First Name

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4. Address: number, street, apartment

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City or Town

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State

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Zip Code

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Home Phone Number

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Work Phone Number

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E-mail Address _____

5. Are you a legal resident of New York State? (See instructions on page 1.) Yes No

6. Check the box that applies to your citizenship status.

Citizen Eligible Non-Citizen Not a Citizen or Eligible Non-Citizen

7. Marital status (Check only one box. See instructions on page 2.)

Unmarried (single, divorced or widowed) Married Separated

8. If married, enter the date you were married. If separated/divorced or widowed, enter the earliest date on which you were separated/divorced or widowed.

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Month Day Year (CCYY)

9. Have you graduated, or will you graduate from high school; or have you received or will you receive a high school equivalency diploma?

Yes No

10. Will all or part of your tuition charges be paid or reimbursed by an employer? Yes No

If yes, enter amount per semester. For Fall 2020 \$ _____ For Spring 2021 \$ _____

APPLICANT/SPOUSE (IF MARRIED) INCOME STATEMENT – (All applicants must answer Questions 11 and 12).

11. Enter number of dependent exemptions (item H) and net Taxable Income (line 37) from your 2018 form IT201.

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|---|---|---------|--|--|--|--|--|
| Applicant's Separate NTI OR Joint NTI with Spouse | | | | | | | |
| Exemptions | Income | | | | | | |
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| Spouse's Separate NTI Only | | | | | | | |
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| <p style="text-align: center;">Check the box if applicable:</p> <p style="text-align: center;"><input type="checkbox"/> I did not file a NYS tax return for 2018</p> |
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12. Were you claimed or eligible to be claimed as a dependent on your parents' New York State or federal tax returns for the previous year?

YES – If yes, YOU MUST REPORT PARENTS' INCOME below.

NO – If no, read and sign the affirmation on the bottom of this page (#15). If you are married, **your spouse must sign** and enter their Social Security number. If you have dependents of your own other than a spouse, check this box.

If you answered "YES" to question 12, that is, you were claimed or were eligible to be claimed as a tax dependent, you must report parental income in question 14. If your parents (stepparents, adoptive parents) filed a tax return as married, you must report total income for both parents.

13. EXCLUSION OF PARENTS' INCOME – If your parents are divorced, separated, never married or one of your parents is deceased, report in question 14 the income of the parent with whom you lived most in the previous year or who had custody or would have had custody if you were a minor.

TO EXCLUDE THE INCOME OF YOUR FATHER (Stepfather, adoptive father) OR MOTHER (stepmother, adoptive mother) give the reason by checking the appropriate box. Enter the date of death or separation/divorce and enter the amount of support received if separated/divorced. Only one parents' income can be excluded for separation/divorce.

To exclude **FATHER's** Income FATHER deceased Separated or divorced Never married

GIVE EARLIEST DATE

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| MONTH | YEAR | | |

To exclude **MOTHER's** Income MOTHER deceased Separated or divorced Never married

GIVE EARLIEST DATE

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|-------|------|--|--|
| | | | |
| MONTH | YEAR | | |

Support Amount – Enter the amount of support received for you from the parent whose income is to be excluded.
If none, enter zero.

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| DOLLARS | | | | | | CENTS | |

(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. ENTER PARENTS EXEMPTIONS AND NET TAXABLE INCOME (NTI) IN THE BOXES PROVIDED FOR THE 2018 TAX YEAR.

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|--|-----------------------|-------------------------------------|---|--|--|---|--|--|--|--|--|---------|--|--|---------|--|--|-------|--|--|-------|--|--|------------|--------|---|--|--|---|--|--|--|--|--|--|--|--|---------|--|--|--|--|--|-------|--|--|
| Fathers' Separate NTI OR Joint NTI with Mother | Mother's Separate NTI | Check the box if applicable: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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15. ALL PERSONS WHOSE INCOMES ARE LISTED IN QUESTIONS 11 AND 14 must read and sign the affirmation.

AFFIRMATION – I hereby certify that all the information provided by me upon this application is accurate and complete. This information will be accepted for all purposes as the equivalent of an affidavit and, if it contains a false statement, shall subject me to the same penalties for perjury as if I had been duly sworn. I authorize the school to release to Higher Education Services Corporation (HESC) any information requested pertinent to this application. I consent to the verification by HESC of any statement made herein and authorize the NYS Department of Taxation and Finance to release to HESC certified copies of my personal income tax returns. I consent to the release by HESC of such information as may be provided by law or regulation in the course of financial aid program administration.

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|------------------------------|------|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Student's Signature | Date | | | | | | | | | | | | | |
| Student's Spouses' Signature | Date | Spouse's SSN <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | First 3 Letters of Last Name <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | |
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| Father's Signature | Date | Father's SSN <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | First 3 Letters of Last Name <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | |
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| Mother's Signature | Date | Mother's SSN <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | | | | | | | First 3 Letters of Last Name <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> | | | |
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Eligibility

An applicant must:

- be a legal resident of New York State and have resided in NYS for at least 12 continuous months prior to the start of the term;
- be a U.S. citizen or eligible noncitizen;
- have graduated from a high school in the United States, earned a high school equivalency diploma by passing a Test Assessing Secondary Completion (TASC) formally known as 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 postsecondary institution;
- be in good academic standing;
- be charged at least \$100 tuition per year;
- meet income eligibility limitations;
- not have exhausted Tuition Assistance Program (TAP) eligibility;
- not be in default on a student loan made under any NYS or federal education loan program or repayment of any NYS award and,
- be in compliance with the terms of any service condition imposed by a NYS award.

Study Requirements

For this program, part-time study means being enrolled for at least:

- 3 but fewer than 12 semester hours per semester.

Income Limits

Eligibility for an APTS award is based on New York State net taxable income, Federal, State or local pension income and private pension and annuity income, if applicable, from the preceding calendar year.

- For students who were eligible to be claimed as tax dependents by their parents, family New York State NET taxable income may not exceed \$50,550. Family income includes student AND parent income.
- For students who were not eligible to be claimed by their parents as tax dependents, their New York State NET taxable income (including spouse's income) may not exceed \$34,250. The spouse's income must be included if they were married on or before December 31 of the previous calendar year.
- For students who were not eligible to be claimed by their parents but were eligible to claim tax dependents other than self and/or spouse, their New York State NET taxable income (including spouse's income) may not exceed \$50,550. The spouse's income must be included if they were married on or before December 31 of the previous calendar year.

Award Amount

Awards provide up to \$2,000 per year (\$1,000 per semester) for part-time undergraduate study at participating institutions in New York State. An APTS award cannot exceed tuition charges.

Students awarded New York State Aid for Part-time Study (APTS) must complete a minimum number of college credits (based on NYS Academic regulations) and maintain a 2.0 or higher GPA.

Aid for Part-Time Study (APTS) Cancellation

- APTS is **not** an entitlement program.
- The APTS guidelines must be met **or** the student's award will be canceled.
- The student must maintain good academic standing for New York State Aid.
- APTS will be canceled if the student exceeds the maximum number of TAP/APTS payments.
- APTS will be canceled if the student is in default on a student loan guaranteed by the New York State Higher Education Services Corporation.
- APTS will be canceled if the funds become unavailable for whatever reason.
- Upon cancellation of APTS, the student may owe a balance.