



**Instructions: This form is to be completed by students (and the parents of students) who are applying for those types of financial aid that require submission of parent information (Tufts Grant, Tufts Loan, Health Professions Student Loan, and Loans for Disadvantaged Students). Please note that the first page is requesting student information, while the second and third pages request custodial parent information. Non-custodial parents must complete the Non-Custodial Parent Statement.**

**PARENT PERSONAL INFORMATION**

PARENT 1 Legal Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
 PARENT 2 Legal Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_\_

**VERIFICATION OF PARENTS' UNTAXED INCOME AND BENEFITS**

*If Parents received any untaxed income/benefits for 2015, complete this section: (write zero or N/A where no income/ benefits were received)*

Payments to Tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on W-2 Forms in boxes 12A-12D codes D, E, F, G, H and S	
Child Support Received for any of your children (do not include foster car or adoption payments)	
Untaxed IRA Distributions (do not include rollovers)	
Tax-exempt Interest income	
Untaxed Portions of Pensions	
IRA deduction and payments (to self-employed SEP, SIMPLE, and Keogh and other qualified plans)	
<b>TOTAL Untaxed Income and Benefits</b>	<b>\$</b>

**VERIFICATION OF PARENTS' INCOME OR CREDIT EXCLUSIONS**

*(Note information reported is excluded from income used to determine student's eligibility for financial aid.)*

American Opportunity, Hope and Lifetime Learning Tax Credits (Per 2015 US Tax Return, Form 8863)	
Taxable Earnings from Federal Work-Study, assistantships or fellowships	
Taxable grant and scholarship aid reported to IRS as part of parents' AGI (Per 2015 US 1040, Form 1099-Misc)	
Combat pay or special combat pay (Per 2015 US Tax Return, 2015 W-2 Form(s))	
Cooperative education program earnings (Per 2015 US Tax Return, 2015 W-2 Form(s))	
<b>TOTAL Parent Income Exclusions</b>	<b>\$</b>

**VERIFICATION OF PARENT'S ASSETS**

- A. **Current** value of all parent cash, savings, checking accounts, bonds, and trust funds: \$ \_\_\_\_\_
- B. Do the student's parents own investments such as stocks and other securities: **YES NO** *If YES, complete the following:*  
 Current market value \$ \_\_\_\_\_ Current debt owed \$ \_\_\_\_\_
- C. Do the student's parents own a business and/or farm: **YES NO** *If YES, complete the following:*  
 Name of business/farm \_\_\_\_\_  
 Current value \$ \_\_\_\_\_ Current debt owed \$ \_\_\_\_\_ Percent ownership \_\_\_\_\_%
- D. Do the student's parents own **another** business and/or farm: **YES NO** *If YES, complete the following:*  
 Name of business/farm \_\_\_\_\_  
 Current value \$ \_\_\_\_\_ Current debt owed \$ \_\_\_\_\_ Percent ownership \_\_\_\_\_%  
*\*\*if additional businesses/farms owned, please list on separate sheet of paper.*
- E. Do the student's parents own a home as principal place of residence: **YES NO** *If YES, complete the following:*  
 Purchase Price of Home \$ \_\_\_\_\_ Year Purchased \_\_\_\_\_ Current debt on home \$ \_\_\_\_\_
- F. Do the student's parents own **other** real estate: **YES NO** **IF YES**, Circle Type of Property: *Commercial Private*  
*\*If YES, complete the following section. This includes vacation homes, land, rental property, etc.*  
 Purchase price of property \$ \_\_\_\_\_ Year of Purchase \_\_\_\_\_ Current debt on property \$ \_\_\_\_\_

**\*\*If additional properties owned (note commercial or private under "Property Type"):**  
 Property Type \_\_\_\_\_ Purchase price of property \$ \_\_\_\_\_ Year of Purchase \_\_\_\_\_ Current debt on property \$ \_\_\_\_\_  
*\*\*if additional properties owned, please list on separate sheet of paper.*

**VERIFICATION OF PARENTS' HOUSEHOLD SIZE AND FAMILY MEMBERS**

A. Parents Current Marital Status (CIRCLE ONE):    \*NEVER MARRIED            MARRIED            \*DIVORCED/SEPARATED            WIDOWED

***\*Must submit Non-Custodial Parent Statement & complete, signed 2015 US Tax Return & W-2 Forms of non-custodial parent.***

- B. Complete the table below listing all family members that student's parents will support between 7/1/17-6/30/18. **INCLUDE:**
- **Student**
  - Parent(s) other dependent children IF parent(s) will provide more than one half their support from 7/1/2017-6/30/2018
  - **Parent(s), including step-parents**
  - Other people currently living in parent(s) household ONLY if parent(s) will provide more than one half their support from 7/1/17-6/30/18.

**\*\*Always include the student even if they are married and/or not supported by their parents\*\***

**\*\*ALWAYS INCLUDE THE PARENTS\*\***

Name	Age	Relationship to Student	College attending in 2017-18 (if any)	Enrollment Status (circle one if applicable)	
		Self	Tufts Dental School	Full time	Half time
		Parent		Full time	Half time
				Full time	Half time
				Full time	Half time
				Full time	Half time
				Full time	Half time

*\*\*If additional space is necessary, please list information under Special Circumstances section of this form.*

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**PLEASE NOTE: WE CANNOT ACCEPT TYPED OR ELECTRONIC SIGNATURES. ALL SIGNATURES MUST BE REAL.**

**PARENT CERTIFICATION:**

I/We certify that all the information on this form is true and complete to the best of my/our knowledge. If asked by an authorized official, I/We agree to give proof of the information that I/We have given on this form. I realize that this proof may include a copy of my Federal, State and/or Local Tax Return. I also realize that if I do not give proof when asked, I may jeopardize my student's ability to receive certain financial aid programs. I also certify that I have read and understand all information that has accompanied this application and promise to notify the Financial Aid Office of any changes in my financial situation.

PARENT 1 SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ PARENT 2 SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**PARENT DISCLOSURE AUTHORIZATION**

In order to protect parent privacy, the Financial Aid Office requires that parents complete the disclosure authorization statement below. If there are concerns regarding both parent and student information being submitted on this document, parents and students are invited to submit two copies of this form: one to be completed by students, with all appropriate sections/signatures, and one to be completed by parents, with all appropriate sections/signatures.

**Parent Authorization Statement**

I/We do \_\_\_\_\_ do not \_\_\_\_\_ authorize the Financial Aid Office to discuss all aspects of the information that I/We have provided in the parental sections of this form with my son/daughter, including information pertaining to income and assets.

PARENT 1 SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ PARENT 2 SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**SPECIAL CIRCUMSTANCES**

*If student or student's family is/are experiencing circumstances that you wish our office to consider when reviewing the student's aid eligibility, please explain below or on a separate sheet of paper and attach to this worksheet. Please document to the greatest extent possible.*