

NEEDS ANALYSIS FORM



This is a financial aid application for students whose presence in the United States is undocumented. Gonzaga's goal is to provide all students access to financial resources, regardless of background.

Student Name:	ID:
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Family Information

List the people in your household, including:

- Yourself and your parent(s) (including stepparent), even if you do not live with your parent(s).
- Your parent(s)' other children, even if they do not live with your parent(s), if your parent(s) will provide more than half of their support for the upcoming year.
- Other people who now live with your parent(s) if your parent provides more than half of their support.

Only include the university/college name for a family member who will be enrolled at least half-time during the academic year in which you are applying for financial aid, and who will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page.

Family Member's Full Name	Age	Relationship to Student	College/University	Will be Enrolled at Least Half Time
1		Self	Gonzaga University	Yes
2				
3				
4				
5				

State of Residence

State of Residence:	Date Residency Established:
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Student Earnings and Tax Information

Has the student filed (or are they going to file) an income tax return for the prior tax year?

- ☐ Yes: Provide our office with a copy of the student's Federal Income Tax Return Form 1040.
- ☐ No: By completing the following table, you are certifying that you are not required to file a U.S. Income Tax return. IRS dependent students who earned more than \$6,100.00 in the previous tax year are required to file a U.S. Income Tax return for that year; students not claimed on a parent's tax return are required to file if they earned more than \$9,750.00 in the previous tax year. **Attach copies of all W-2 forms issued to you (and, if married, to your spouse) by employers. If no W-2 is available, please provide our office with the final paystub from the previous tax year that shows the student's total gross income.**

Complete the table below to report student's earned income information from the previous tax year.

Student	Student's Spouse (if applicable)
Total Yearly Income - \$	Total Yearly Income - \$
Employer(s):	Employer(s):

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Student Name:

ID:

Parent Earnings and Tax Information

Have the parents filed (or are they going to file) an income tax return for the prior tax year?

- ☐ Yes: Provide our office with a copy of the student's Federal Income Tax Return Form 1040.
- ☐ No: By completing the following table, you are certifying that the parent(s) are not required to file a U.S. Income Tax return. Parents who earned more than \$9,750.00 in the tax calendar year are required to file a U.S. Income Tax Return. **Attach copies of all W-2 forms issued to the parent(s) by employers. If no W-2 is available, please provide our office with the final paystub from the previous tax year that shows the parent(s)'s total gross income.**

Complete the table below to report student's earned income information from the previous tax year.

Parent 1	Parent 2
Total Yearly Income - \$	Total Yearly Income - \$
Employer(s):	Employer(s):

Certification and Signatures

By signing this form, I affirm that all information on this form and on any attachments is complete and accurate to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.

Student Signature (Required)

Date

Parent Signature (Required for Dependent Students)

Date