



## 2020 – 2021 ISIR CORRECTION WORKSHEET

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **SS#:** \_\_\_\_\_ **EMPLID:** \_\_\_\_\_

I authorize the Financial Aid Office at New York City College of Technology to make the changes below based on information I/we have provided. These changes represent information that is correct to the best of my/our knowledge.

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **\*All 2020-2021 documents must be submitted and all problems with your FAFSA must be resolved before your last date of attendance at City Tech.**  
**Parent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### DO NOT WRITE BELOW FINANCIAL AID OFFICE USE ONLY

Step One: Student Demographic Information		Step Three: Needs To Provide Parental Information?	
1. Student's Last Name		45. Student Born Before 01/01/1997?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2-3. First Name, Middle Initial		46. Married as of FAFSA Signing Date?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Street Address & Apt #:		47. Working on Grad Program in 2020-2021?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5-7. City, State & Zip Code:		48. Currently Serving on Active Duty?	Yes <input type="checkbox"/> No <input type="checkbox"/>
8. Social Security # (Attach copy of SS Card if correcting)		49. Veteran of U.S Armed Forces?	Yes <input type="checkbox"/> No <input type="checkbox"/>
9. Date of Birth (MMDDYYYY)		50. Have Children whom Student supports > Half?	Yes <input type="checkbox"/> No <input type="checkbox"/>
10. Telephone #		51. Does Student Support Other Dependents (not Children/Spouse) who live with him/her?	Yes <input type="checkbox"/> No <input type="checkbox"/>
13. Email Address		52. Was Student an Orphan/dependent or Ward of Court or in Foster Care at any time since age 13?	Yes <input type="checkbox"/> No <input type="checkbox"/>
14. Is Student a US Citizen?	US Citizen <input type="checkbox"/> Elig. Non-citizen <input type="checkbox"/>	53. Is Student Emancipated minor?	Yes <input type="checkbox"/> No <input type="checkbox"/>
15. Alien Registration Number	A-	54. Was Student In Legal Guardianship other than parent?	Yes <input type="checkbox"/> No <input type="checkbox"/>
16. Marital Status on FAFSA Filing Date		55. Is Student Homeless per School District Liaison?	Yes <input type="checkbox"/> No <input type="checkbox"/>
17. Month & Year Student Married, remarried, Separated, Divorced. or Widowed		56. Is Student Homeless per HUD Shelter Director?	Yes <input type="checkbox"/> No <input type="checkbox"/>
18. State of Legal Residence :	19. Before 1/1/15? Yes <input type="checkbox"/> No <input type="checkbox"/>	57. Is Student Homeless or at risk per Youth Center/Transitional Living Program Director?	Yes <input type="checkbox"/> No <input type="checkbox"/>
20. If No, give month and year:		<b>Step Four: About the Student's Parents</b>	
22. Registered with Selective Service? (Males Only)	If not, register me <input type="checkbox"/>	58. Parent's Marital Status on date of signing	
23. Drug Conviction while receiving financial aid? (Only if blank)	No <input type="checkbox"/> Yes <input type="checkbox"/>	59. Month & Year Parents Married, Separated, Divorced. or Widowed	
27. High School Name , City, & State where the High school is located:		60. Parent 1 SS#	
28. 1 <sup>st</sup> Bachelor's Degree before begin 2020-2021? Yes <input type="checkbox"/> No <input type="checkbox"/>	31. Interested in Work Study? Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know <input type="checkbox"/>	61-62. Parent 1 Last Name & First Initial:	
<b>Step Two: Student Income &amp; Assets</b>		63. Parent 1 Date of Birth	
32. Filed 2018 Tax Return?	Yes <input type="checkbox"/> No <input type="checkbox"/>	64. Parent 2 SS#	
33. Type of 2018 Tax Return Filed	1040 <input type="checkbox"/> Foreign <input type="checkbox"/> Puerto Rico <input type="checkbox"/>	65-66. Parent 2 Last Name & First Initial:	
34. Tax Filing Status		67. Parent 2 Date of Birth	
35. Student/Spouse filed a schedule 1?	Yes <input type="checkbox"/> No <input type="checkbox"/>	68. Parent's Email address:	
36. Student/Spouse's AGI		69. Parent's state of Legal Residence :	70. Before 1/1/15? Yes <input type="checkbox"/> No <input type="checkbox"/>
37. Student/Spouse's Income Tax Paid		71. If No, give month and year:	
38. Student's Amt Earned From Work		72. Parent's Household Size	
39. Spouse's Amt Earned From Work		73. Parent's # in College	
40. Student/Spouse's Cash, Savings, Checking Accounts on date of signing.		74. – 78. In 2018 or 2019 did anyone in parents' household receive any of the following: Medicaid or SSI <input type="checkbox"/> SNAP <input type="checkbox"/> Free/Reduced Price Lunch <input type="checkbox"/> TANF <input type="checkbox"/> WIC <input type="checkbox"/>	
41. Student/Spouse's Investments Net Worth on date of signing		<b>Step Five: Student Household Size/Benefits</b>	
42. Business/Farm Net Worth on date of signing		93. Student's Household Size	
		94. Student's # in College	
		95. – 99. In 2018 or 2019 did Student/Spouse receive any of the following: Medicaid or SSI <input type="checkbox"/> SNAP <input type="checkbox"/> Free/Reduced Price Lunch <input type="checkbox"/> TANF <input type="checkbox"/> WIC <input type="checkbox"/>	
		100. Student/Spouse Dislocated Worker?	Yes <input type="checkbox"/> No <input type="checkbox"/>
		101. Housing Plans	Off Campus <input type="checkbox"/> With Parents <input type="checkbox"/>

**Date Trans.** \_\_\_\_\_ **Operator Init.** \_\_\_\_\_  
**Date Retrans.** \_\_\_\_\_ **Operator Init.** \_\_\_\_\_

**New ISIR Sequence:** \_\_\_\_\_ **New EFC:** \_\_\_\_\_  
**Retrans. ISIR Sequence:** \_\_\_\_\_ **Retrans EFC:** \_\_\_\_\_

Step Four (continued): Parent Income & Asset Information		Parent/Student Business Information (Qs. 42 & 90)							
79. Filed 2018 Tax Return?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Business Name:							
80. Type of 2018 Tax Return Filed	1040 <input type="checkbox"/> Foreign <input type="checkbox"/> Puerto Rico <input type="checkbox"/>	Does your family own and control more than 50 percent of the business? Yes <input type="checkbox"/> No <input type="checkbox"/> (Your family includes (1) persons directly related to you, such as a parent, sister or cousin, or (2) persons who are or were related to you by marriage, such as a spouse, step-parents or sister-in-law.)							
81. Parent's Filing Status		If Yes, does the business have 100 or fewer full-time or full-time equivalent employees? Yes _____ No _____ If No, provide Net Worth of the Business.							
82. Parent(s) filed a schedule 1?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Business value \$ _____ minus Business debt \$ _____ = Net Worth \$ _____.							
83. Is either Parent Dislocated Worker?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Parent/Student Real Estate Property Information							
84. Parent's AGI		Rental Real Estate is a unit within a family home that has its own entrance, kitchen, and bath and that is rented to someone other than a family member.							
85. Parent's Tax Paid		Address:							
86. Parent 1 Amt Earned From Work		<b>As of the time of signing FAFSA</b>							
87. Parent 2 Amt Earned From Work		<table border="1" style="width: 100%;"> <tr> <td>Current Market Value</td> <td></td> </tr> <tr> <td>Current Property Debt</td> <td></td> </tr> <tr> <td>Percentage of home that is rental property</td> <td></td> </tr> </table>		Current Market Value		Current Property Debt		Percentage of home that is rental property	
Current Market Value									
Current Property Debt									
Percentage of home that is rental property									
88. Parent's Cash, Savings, Checking Accounts on date of signing		Net Worth \$ _____ (Enter in question #41 or 89)							
89. Parent's Investments Net Worth (market value on signing date minus debt)									
90. Parent's Business/Farm Net Worth									

Income Exclusions		
STUDENT Question 43		PARENT(S) Question 91
	a. Education Credits (Hope and Lifetime Learning)	
	b. Child Support Paid because of divorce or separation or as a result of a legal requirement. (Do not include support for children in your household)	
	c. Taxable Earnings from Need-Based employment programs (i.e. FWS) reported on your AGI	
	d. Student Grants and Scholarship aid reported to the IRS in your AGI	
	e. Taxable Combat Pay or Special Combat Pay Amount included in AGI	
	f. Earnings from work under a cooperative education program	
Untaxed Income		
STUDENT Question 44		PARENT(S) Question 92
	a. Payments to Tax Deferred Pension and Savings Plans. Codes: D, E, F, G, H and S.	
	b. IRA Deductions and Payments to self-employed SEP, SIMPLE, Keogh and other IRS form 1040 schedule 1 lines 28 + 32	
	c. Child Support Received for any of your Children (Do Not Include Foster Care or Adoption Payments)	
	d. Tax Exempt Interest Income from IRS form 1040 line 2a	
	e. Untaxed Portions of IRA Distributions & Pensions from IRS form 1040 line 4a minus line 4b. Exclude rollovers. If negative, enter a zero here.	
	f. Housing, Food, and Other Living Allowances Paid to Members of the Military, Clergy and others	
	g. Veterans Noneducation Benefits such as Disability, Death Pension, etc.	
	h. Other Untaxed Income not reported such as Worker's Compensation, etc. IRS form 1040 schedule 1 line 25	
	i. Money Received or Paid on Your Behalf (e.g. bills)	XXXXXXXXXXXXXXXXXXXX

**DEPENDENCY OVERRIDE**  **INCOME REDUCTION**  **UNUSUAL EXPENSES**  **TRANS #** \_\_\_\_\_ **EFC** \_\_\_\_\_

It is the policy of City Tech to recruit, employ, retain, promote, and provide benefits to employees and to admit and provide services for students without regard to race, color, national or ethnic origin, religion, age, sex, sexual orientation, gender identity, marital status, disability, genetic predisposition or carrier status, alienage, citizenship, military or veteran status, unemployment status or status as a victim of domestic violence.

FA Signature + Initial \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_