

UNIVERSITY OF SOUTH FLORIDA ST. PETERSBURG CAMPUS

**STUDENT SUPPORT SERVICES
Eligibility Assessment Form**

Student's Name: _____ USF ID #: _____		
Social Security #: _____/_____/_____ DOB: _____/_____/_____		
Telephone Number: _____		
U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No Alien Registration Number: _____ If No, please submit a copy of your Alien Registration card (Green Card)		
Is the student: (please check if applicable) <input type="checkbox"/> Upward Bound <input type="checkbox"/> AVID <input type="checkbox"/> CROP <input type="checkbox"/> Homeless <input type="checkbox"/> Disabled <input type="checkbox"/> Foster Care <input type="checkbox"/> ESL(English as Second Language) <input type="checkbox"/> Veteran		
Did the student file a 2019 federal income tax return: Yes <input type="checkbox"/> No <input type="checkbox"/>		
If "yes," student's 2019 taxable income earned from work: \$ _____ (found on line 43 of the 1040 tax form, found on line 27 of the 1040A tax form)		
Student's Signature: _____		
Ethnicity: <input type="checkbox"/> White Hispanic <input type="checkbox"/> Black Hispanic <input type="checkbox"/> Black Non-Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Native American <input type="checkbox"/> Caucasian Non-Hispanic <input type="checkbox"/> Other		
If Other, please describe: Was USF your university of first choice? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Family Information: Do either of the student's parents have a four-year college degree?		
Father	Yes	No
Mother	Yes	No
The remaining information on this form should be completed by the parent(s) or legal guardian(s) of the student. If the parents are divorced or separated, the form should be completed by the parent the student lived with most during 2019. If the parent the student lived with during 2019 has married or remarried, you must also include the step-parent's information.		
1. Current Marital Status: ___ Unmarried (single, divorced, widowed) ___ Married ___ Separated		
2. State of legal residence:	3. Total number of people in your household during 2020-2021 (July 1, 2020 - June 30, 2021): _____	
4. Of the number in 3, write in the number who were in college at least half time during 2020-2021 (July 1, 2020 - June 30, 2021): _____		

Parent's 2019 taxable and nontaxable income. If an item does not apply, write in zero:		
Did the parent(s) file a 2019 federal income tax return: <input type="checkbox"/> Yes <input type="checkbox"/> No		
2019 Taxable Income (not AGI): \$ _____ (found on line 43 of the 1040 tax form, found on line 27 of the 1040A tax form)		
	Father	Mother
Income earned from work (wages or business income)	\$ _____	\$ _____
Please specify other taxable income:		
Nontaxable Income		
	Father	Mother
Social Security / Disability Benefits	\$ _____	\$ _____
Aid to families with dependent children (AFDC or ADC)	\$ _____	\$ _____
Tax deductible payments to IRA/Keogh	\$ _____	\$ _____
<i>Other</i> untaxed income and benefits	\$ _____	\$ _____
Please specify source(s) of other nontaxable income:		
Parent Certification		
All of the information on this form is true to the best of my/our knowledge.		
Father (print)		
Father (signature)		Date
Mother (print)		
Mother (signature)		Date
Parent email (only one needed; use all capital letters)		
Acting Parent or Guardian Certification		
All of the information on this form is true to the best of my/our knowledge.		
Acting Parent or Guardian (print)		
(signature)		Date
Acting Parent or Guardian (print)		
(signature)		Date

Send this form and a copy of your parent's **completed & signed** 2019 tax transcript or 1040 and/or Social Security/Disability statement to our office. Please ensure the student's name and U# is on each page. You may send this information to us via email at: asksss-usfsp@usf.edu

Do not postpone sending these documents, as it will cause a delay in receiving an SSS admissions decision and USF admissions decision.