



St. John's University
Office of Student Financial Services
Additional Financial Information

Student Name: _____ ID Number X _____

Contact Number: _____ Alternate/Cell Number: _____

Submit form by securely uploading to: www.stjohns.edu/SFSdocumentupload

Please do not submit originals of any supporting documentation. Originals cannot be returned.

You and/or your parent(s) manually provided one or more of the below items on the FAFSA form. Before we can process your financial aid, clarification is needed of the amounts reported. Please check all that apply to you and/or your parent(s), indicate an amount, and provide documentation to support your claim.

Education credits (American Opportunity and Lifetime Learning Tax Credits) from 2022 IRS Form 1040 Schedule 3- line 3. Student/Spouse \$ _____ Parent(s) \$ _____

Taxable college grants, scholarships, or AmeriCorps benefits reported to the IRS as income on the tax return.

Include grant & scholarship (not employment) portions of fellowships and assistantships, as well as taxable stipends and employer tuition reimbursements. Include AmeriCorps benefits (awards, living allowances, and interest accrual payments) except those for health care or child care. This does not include scholarships/grant aid received from the university. \$ _____ \$ _____

A mistake was made on the FAFSA and there are no income exclusions for the academic year

CERTIFICATION: I (we) hereby attest that all the information on this form is accurate to the best of my (our) knowledge. I (we) understand that providing false or misleading information can jeopardize financial aid eligibility and subject me (us) to federal penalties.

Student's Signature _____ Date _____

Student's Spouse Signature _____ Date _____

Parent's Signature _____ Date _____