



We recommend completing this form online. It's easy, fast and secure. Visit <http://www.mytads.com/> to begin the online application.

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Before you fill out this application, please read at least the first page of the included **Application Instructions**. Almost every question on this form has an accompanying explanation on the Application Instructions, so please use that to your advantage. You will also need to reference various documents throughout this application, a list of which can be found on the last page of the Application Instructions.

Please use a **black ball-point pen** and **capital letters** to mark answers. If an item does not apply to you, simply leave it blank.

### SECTION 1 Parent/Guardian Information (Parents, Stepparents, Guardians — do not list divorced parent living outside the household)

Parent/Guardian #1

1. Last Name

2. First Name

3. Mid Initial

4. Year of Birth

5. Day Phone Number

6. Relationship to Dependents in Household (choose one or more items)

Parent  Stepparent  Guardian  Family Member or Significant Other

7. Work Status (choose one or more items)  Employed  Unemployed  Retired  Self Employed  Student  Homemaker  Temporarily Disabled  Permanently Disabled

Parent/Guardian #2

1. Last Name

2. First Name

3. Mid Initial

4. Year of Birth

5. Day Phone Number

6. Relationship to Dependents in Household (choose one or more items)

Parent  Stepparent  Guardian  Family Member or Significant Other

7. Work Status (choose one or more items)  Employed  Unemployed  Retired  Self Employed  Student  Homemaker  Temporarily Disabled  Permanently Disabled

### SECTION 2 Household Address Information

1. Street

2. City

3. State  4. Zip

5. Home Phone

6. E-mail Address (please enter a valid e-mail address — we will use this address for correspondence if possible)

### SECTION 3 List all jobs held by Parent(s)/Guardian(s) since January 1, 2018, even if no longer at this job

If Parent(s)/Guardian(s) have had more than four jobs since January 1, 2018, please ask your financial aid officer for an addendum to this form.

1. Whose Job?	2. Employer	3. Currently at Job?	4. 2018 Wages, Tips, Other Compensation (Line 1 of your most recent W-2)	5. 2019 Estimated Wages, Tips, Other Compensation For This Job
Job #1 <input type="radio"/> P/G #1 <input type="radio"/> P/G #2	<input type="text"/>	<input type="radio"/> Yes	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Job #2 <input type="radio"/> P/G #1 <input type="radio"/> P/G #2	<input type="text"/>	<input type="radio"/> Yes	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Job #3 <input type="radio"/> P/G #1 <input type="radio"/> P/G #2	<input type="text"/>	<input type="radio"/> Yes	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Job #4 <input type="radio"/> P/G #1 <input type="radio"/> P/G #2	<input type="text"/>	<input type="radio"/> Yes	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

### SECTION 4 List Business, Farm, Corporation, Partnership, Trust and Miscellaneous Income since January 1, 2018

If Parent(s)/Guardian(s) have had more than two businesses since January 1, 2018, please ask your financial aid officer for an addendum to this form.

Business #1

1. Business Name

2. Still Operating?  Yes

3. Percent Owned

4. Type of Business  Proprietorship  Partnership  Corporation  Farm

5. 2018 Actual Net Profit \$

6. 2018 Actual Depreciation \$

7. 2019 Estimated Net Profit \$

Business #2

1. Business Name

2. Still Operating?  Yes

3. Percent Owned

4. Type of Business  Proprietorship  Partnership  Corporation  Farm

5. 2018 Actual Net Profit \$

6. 2018 Actual Depreciation \$

7. 2019 Estimated Net Profit \$



SECTION 5 Other Monthly Income

Monthly Social Security for

1. Welfare Income \$ [ ][ ] , [ ][ ] [ ][ ]
2. Food Stamps \$ [ ][ ] , [ ][ ] [ ][ ]
3. Parent(s)/Guardian(s) \$ [ ][ ] , [ ][ ] [ ][ ]
4. Dependents under 19 \$ [ ][ ] , [ ][ ] [ ][ ]
5. Elderly Dependents \$ [ ][ ] , [ ][ ] [ ][ ]

Monthly Average Amount Received for

Miscellaneous Monthly Income

6. Child Support \$ [ ][ ] , [ ][ ] [ ][ ]
7. Alimony \$ [ ][ ] , [ ][ ] [ ][ ]
8. Taxable \$ [ ][ ] , [ ][ ] [ ][ ]
9. Non-Taxable \$ [ ][ ] , [ ][ ] [ ][ ]
10. Types of Miscellaneous Income:
Housing Allowance ( ), Veteran Benefits ( )
Annuity ( ), Insurance ( ), Retirement ( )

SECTION 6 Other Yearly Income

Yearly Workers' Compensation

Yearly Unemployment

1. 2018 Interest & Dividends \$ [ ][ ] , [ ][ ] [ ][ ]
2. Actual 2018 \$ [ ][ ] , [ ][ ] [ ][ ]
3. Estimated 2019 \$ [ ][ ] , [ ][ ] [ ][ ]
4. Actual 2018 \$ [ ][ ] , [ ][ ] [ ][ ]
5. Estimated 2019 \$ [ ][ ] , [ ][ ] [ ][ ]

Miscellaneous Yearly Income

6. 2018 Lump Sum \$ [ ][ ] , [ ][ ] [ ][ ]
7. Recurring Yearly \$ [ ][ ] , [ ][ ] [ ][ ]
8. Types of Miscellaneous Yearly Income Received in 2018 (choose one or more items):
Royalties ( ), Inheritance ( ), Insurance ( ), Winnings ( ), Capital Gains ( )
Business Income not included in Section 4 ( ), Assistance from Friends/Relatives ( )

SECTION 7 List all Tuition Charging Schools, including Colleges and Public Universities

INSTRUCTIONS: TADS cannot process your application without this info. DO NOT list a school more than once! S C H O O C I T Y N 1 2 3 4 5

1. See the School Directions for a list of all the schools in your financial aid program. 2. From this list of schools, select all of the school(s) that your dependents may attend next school year (2019-2020). 3. Enter the first five letters of the school name, school city and the school ID as they are listed on the School Directions; see example above. 4. Enter a school name only once; do not repeat school entries even if more than one dependent is attending the school. 5. Next, list all other tuition charging schools that your children will most likely attend next year that are not on this list. 6. Enter the ID of "99999" for these schools. This ID indicates that your dependents are attending a school not in this financial aid program.

Table with 4 columns: School Name, School City, School ID Number, Tuition Amount. Includes options A-Z and X-Z for school selection.

Form ID: 100004

SECTION 8 List all Dependents in the Household; do not include Parent(s)/Guardian(s)

TADS cannot process your application without this information. If you have more than five dependents, please ask your financial aid officer for an addendum.

Table for dependents with columns: #, Last Name, First Name, M.I., Birth Year, Grade in 2019-20, School selection (A-Z, X-Z), Foster Child status.

SECTION 9 Application Processing Fees

Required Processing Fee \$ 39. TADS cannot process your application without payment.

Payment Method (Check, Money Order, Visa, MasterCard, Amex, Disc), Credit Card Number, Credit Card Expiration Date (MMYY), Name as it Appears on the Credit Card.

SECTION 10 Special Code Information

1. Code Number [ ][ ][ ]

SECTION 11 Statement and Signatures

I declare that the information on this form is, to the best of my knowledge, correct and complete. I authorize the transmittal of the information on this form to the schools to which my children are applying for tuition assistance...

Parent/Guardian #1 Signature \_\_\_\_\_ Parent/Guardian #2 Signature \_\_\_\_\_

Office Use Only

Table for office use with columns: Code, Status (Yes/No).



**FORM IDENTIFICATION** Please provide the following information from your paper TADS application

1. Parent/Guardian Last Name

2. Form ID (upper-left corner on application)

3. Household Phone Number

**SECTION 3 (cont.)** List all jobs held by Parent(s)/Guardian(s) since January 1, 2018, even if no longer at this job

Job #	1. Whose Job? <input type="radio"/> P/G #1 <input type="radio"/> P/G #2	2. Employer <input type="text"/>	3. Currently at Job? <input type="radio"/> Yes <input type="radio"/> No	4. 2018 Wages, Tips, Other Compensation (Line 1 of your most recent W-2) \$ <input type="text"/>	5. 2019 Estimated Wages, Tips, Other Compensation For This Job \$ <input type="text"/>
Job #5					
Job #6					
Job #7					
Job #8					

**SECTION 4 (cont.)** List Business, Farm, Corporation, Partnership, Trust and Miscellaneous Income since January 1, 2018

Business #	1. Business Name <input type="text"/>	2. Still Operating? <input type="radio"/> Yes <input type="radio"/> No	3. Percent Owned <input type="text"/>	4. Type of Business <input type="radio"/> Proprietorship <input type="radio"/> Partnership <input type="radio"/> Corporation <input type="radio"/> Farm	5. 2018 Actual Net Profit \$ <input type="text"/>	6. 2018 Actual Depreciation \$ <input type="text"/>	7. 2019 Estimated Net Profit \$ <input type="text"/>
Business #3							
Business #4							

**SECTION 8 (cont.)** List all Dependents in the Household; do not include Parent(s)/Guardian(s)

**!** TADS cannot process your application without this information. If you have more than five dependents, please ask your financial aid officer for an addendum.

	1. Last Name <input type="text"/>	2. First Name <input type="text"/>	3. M.I. <input type="text"/>	4. Birth Year <input type="text"/>	5. Grade in 2019-20 <input type="text"/>	6. Choose a school from Section 7 above <b>A B C D X Z</b> <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> X <input type="radio"/> Z	7. A Foster Child (ward of the state)? <input type="radio"/> Yes
#6				Y Y			
#7				Y Y			
#8				Y Y			
#9				Y Y			

Please submit this addendum with your TADS application.