Suffolk County Community College

2023-2024 Aid for Part-Time Study (APTS) Application Instructions

Before submitting your application: Complete the 2023-2024 Free Application for Federal Student Aid (FAFSA) at <u>studentaid.gov</u>. If you did not complete the NYS Student Aid Payment Application when completing the FAFSA, you can do so at <u>tap.hesc.ny.gov</u>. **We cannot review your APTS application until both the FAFSA and the NYS Student Aid Payment Application have been completed.**

Submit the **signed** and completed 2023-2024 APTS application and a **signed** copy of **your (and your spouse's, if applicable) 2021 NYS Income Tax return (IT-201**). Students who are required to provide parental income information must also submit a **signed** copy of their **parent's 2021 NYS IT-201 return**. Refer to the additional instructions on the application to determine if you must report parental income. **All income questions on the application require you to report 2021 income.**

APTS is awarded on a fund-availability basis. The award is for tuition charges only, not books or fees. Matriculated students can be awarded for registration in at least 3 but not more than 11.5 degree credits. APTS will pay for developmental courses, but you must also register for at least 3 college level credits in your program to qualify for an award.

Students must meet academic and enrollment eligibility requirements established by NYS Higher Education Services Corporation (HESC) and SCCC. All awards are tentative and subject to reduction or cancellation should you drop or withdraw from any course, or change from part-time to full-time. This may result in tuition liability to the college. Additionally, courses registered for but never attended (designated as NA), will not be funded with APTS.

Based on your overall eligibility, you might qualify for the NYS Part Time TAP award in lieu of or in addition to APTS. SCCC will determine which NYS award is in your best interest, and notify you of your award/s.

Always consult with your Financial Aid Office before dropping or withdrawing from any class as this may affect your award(s) as well as future eligibility.

Name:		ID#:	
Home Phone:		Cell Phone: _	
I have attached a signe	d copy of:		
My (and my spou	use's, if applicable) 2021 N	/S Income Tax return (IT-20	01).
My parent's 202	1 NYS Income Tax return	(if required).	
I did not and I a	m not required to file a 20	21 NYS Income Tax return.	
My parents did	not and are not required t	o file a 2021 NYS Income T	ax Return.
I certify that all the inform	mation provided on this form	n is true to the best of my kno	owledge:
Student Signature:		Date:	
Parent Signature:		Date:	
Central Administration 533 College Road Selden, NY 11784-2899 P (631) 451-4108		Michael J. Grant Campus Crooked Hill Road Brentwood, NY 11717-1092 P (631) 851-6712	121 Speonk-Riverhead Road

F (851) 851-6814

faidwest@sunysuffolk.edu

F (631) 548-3651

faideast@sunysuffolk.edu

F (631) 451-4640

faidammr@sunysuffolk.edu

F (631)451-4672

financialaid@sunysuffolk.edu