



Science & Technology Entry Program
Monroe Community College



Student Name: _____

This form reflects the criteria set forth by New York State for determination of "low-income" status and eligibility for the STEP program.

- Ethnicity:
- Black / African American -- STOP HERE -- you do not need to complete this form
 - Hispanic / Latino -- STOP HERE -- you do not need to complete this form
 - Native American Indian / Alaskan Native -- STOP HERE -- you do not need to complete this form
 - Asian / Pacific Islander
 - White, Non-Hispanic
 - Other: _____

- Student is (choose one):
- Recipient of Social Services (Family Assistance Program Aid, Safety Net Assistance, family day-care payments)
* please provide documentation showing that benefits were received in 2005 and the names of recipients including STEP applicant
 - Foster Child or Ward of the State
* please provide documentation
 - None of the above, but student is a member of a household:
 - supported by one parent if dependent, by the student or by a spouse if independent, whose total annual income is not more than the applicable amount listed in the table below; **or**
 - supported solely by one member thereof who works for two or more employers with a total annual income which does not exceed the applicable amount set forth in the following table by more than **\$1,800; or**
 - supported by more than one worker (parents if dependent, student and spouse if independent) in which the total income does not exceed the applicable amount listed in the table below by more than **\$4,800; or**
 - supported by one worker (parent if dependent, student if independent) who is the sole support of a one-parent family in which the total annual income does not exceed the applicable amount listed in the table below by more than **\$4,800.**

For the purpose of this calculation, the number of members of a household shall be determined by ascertaining the number of individuals living in the student's residence who are economically dependent on the income supporting the student.

For students applying to STEP between July 1, 2006 and June 30, 2007.

**Number of members in household ----- Total annual income in 2005
(including head of household)**

1 -----	\$14,100
2 -----	\$19,600
3 -----	\$22,350
4 -----	\$27,800
5 -----	\$32,850
6 -----	\$38,550
7 -----	\$42,900

More than 7 -- \$42,900 plus \$4,350 for each member in excess of 7

* please provide documentation of income (signed copy of 2005 tax return; documentation of pension, annuity, or unemployment benefits showing total award for 2005; documentation of Social Security, Supplemental Security Income; or Veterans Administration non-education benefits showing total award for 2005 for each member of the household including Medicare premiums or IRS form 1099 for each member; documentation of child support and/or alimony — court order, affidavit; etc.) or of no income (copy of IRS form 4506 or IRS Letter 1722)

* or provide documentation of additional members in household: birth certificates, marriage certificates, third-party verification, or similar documentation — along with proof of income or lack of income for each member

* or documentation of zero household contribution: the needs analysis output form from one of the United States Department of Education's approved needs analysis systems.

- None of the above -- student does not meet economic eligibility requirements for the STEP program.

Parent(s)/Guardian(s) Signature

Date