

Office of Student Financial Aid & Planning 2025-2026 Supplemental Financial Aid Form

Students applying for school need-based financial aid, their spouses (if applicable), and their parents are required to complete all sections, attach requested documentation, and sign this form. Your file will not be considered complete nor can any awards be made until all forms are completed, signed, and received by the Office of Student Financial Aid & Planning. This includes complete 2024 tax forms. Keep copies of all forms you submit for your records. **Financial aid renewal is not automatic. Students must reapply for financial aid each year in which they would like to be considered for assistance.**

1. Complete the entire application. Do not leave any questions blank. If a question does not apply, note “N/A” in the space provided. Questions left blank will delay the review of your file.

- Both the student, spouse (if applicable) and the parent(s) must sign this application. If parents are divorced or separated, please submit separate forms for custodial and non-custodial parent. Please be sure that your name, CUID and graduation year are filled in on both the custodial and non-custodial parent form. Please send completed form to cumc-sfp@cumc.columbia.edu.

2. 2024 U.S. Federal or Foreign Tax Returns must be submitted by April 15, 2025

- **Student, spouse (if applicable) and parent(s) signed 2024 tax returns, including all schedules and W-2s:** Submit a signed copy of IRS 1040 or translated foreign income tax return with all schedules and W-2 forms. If you or your parent(s) file taxes electronically, the filer must still submit a signed copy (in ink) of the tax return. The website for submission is not yet live. We will let the student know when our website is updated for 2025-26.
- Students planning to marry during the 2025-26 academic year will need to submit intended spouse’s information and taxes.
- **Non-tax Filer:** If you, your spouse, and/or your parents are not filing tax returns for 2024, please complete the “Why I Did Not File a Tax Return” form available on our website. We will let students know when our website is updated for 2025-26.

1. Student General

Student Name _____
 CUID _____
 Graduation Year _____

Student Marital Status: Single Married Divorced/Separated Widowed

Spouse’s Name _____ Date of marriage or planned date of marriage _____/_____/_____

2. Parent General

Are your biological/adoptive parents:

married separated divorced unmarried living together unmarried living separately widowed

Custodial Parent This is the parent and/or stepparent with whom you reside when not in school. This should be the same as the custodial parent(s) listed on your FAFSA and initial CSS Profile.

Custodial Parent One

Father Stepfather Legal guardian
 Mother Stepmother Other

Name _____
 Address _____
 Telephone (____) _____
 Email _____

Custodial Parent Two

Father Stepfather Legal guardian
 Mother Stepmother Other

Name _____
 Address _____
 Telephone (____) _____
 Email _____

Non-custodial Parent (if applicable) Complete if biological/adoptive parents are divorced, separated, or unmarried living separately.

Non-custodial Parent should complete separate form.

Year of separation: _____ Year of divorce: _____

Noncustodial Parents Name _____

Address _____

3. Household Income

2024 Year Income

Anticipated 2025 Year Income

Student Earned Income	\$ _____	Student Earned Income	\$ _____
Spouse Earned Income	\$ _____	Spouse Earned Income	\$ _____
Other Taxable Income	\$ _____	Other Taxable Income	\$ _____
Untaxed Income and Benefits	\$ _____	Untaxed Income and Benefits	\$ _____

2024 Year Income

Anticipated 2025 Year Income

Parent 1 Earned Income	\$ _____	Parent 1 Earned Income	\$ _____
Parent 2 Earned Income	\$ _____	Parent 2 Earned Income	\$ _____
Other Taxable Income	\$ _____	Other Taxable Income	\$ _____
Untaxed Income and Benefits	\$ _____	Untaxed Income and Benefits	\$ _____

4. Amounts and Sources of Untaxed Income

List the total amounts of all sources of untaxed income received and not reported on a 2024 tax return.

	Student/Spouse	Parent(s)
Income Earned from Work (if return not filed)	Amount \$ _____ Source _____	Amount \$ _____ Source _____
Aid to Families with Dependent Children (AFDC)	Amount \$ _____ Source _____	Amount \$ _____ Source _____

Parent

Business/Farm (Check all that apply)	% of ownership	# of employees	Business Value	Business Debt
Schedule C Sole Proprietorship*	_____	_____	\$ _____	\$ _____
Partnership*	_____	_____	\$ _____	\$ _____
S Corporation*	_____	_____	\$ _____	\$ _____
C Corporation*	_____	_____	\$ _____	\$ _____
Farm*	_____	_____	\$ _____	\$ _____

*Submit corresponding tax return.

6. Family Information

In the family grid below, please list the name, age, and relationship for each family member living in your household. **You should always include yourself, spouse(if applicable), parents and your dependent children.** Also, include siblings and other relatives for whom you and/or your parents will be providing more than half of their support from July 1, 2025 to June 30, 2026.

	Name	Age	Relationship to Student
1.			Self
2.			
3.			
4.			
5.			
6.			

Check here if there are more than six family members and list in section 8.

Will any of the above family members (besides your parents) attend college in the 2025–2026 academic year? If yes, provide the following information for each family member. Include college information only if enrolled full-time in a degree granting program. Verification of sibling(s) enrollment in college for the 2025–2026 academic year will be required in September 2025. Adjustments will be made for siblings whose attendance plans change from the time you complete this.

First and Last Name of Family Member	Relationship	Age	Name of College	Undergrad or Grad
1. Student				
2.				
3.				
4.				

7. Outside Scholarship/Resource Information

Please list the name and annual amount of any outside scholarship or tuition benefit that you have been awarded for the 2025–2026 academic year. Be sure to indicate if the scholarship is renewable for future years. Attach a copy of the notification/award letter.

Name of Scholarship or Resource	Source/Agency	Amount for 25-26	Renewable	
1.			<input type="checkbox"/> yes	<input type="checkbox"/> No
2.			<input type="checkbox"/> yes	<input type="checkbox"/> No
3.			<input type="checkbox"/> yes	<input type="checkbox"/> No

8. Additional Information and Special Circumstances

Use the following space to answer any questions more completely or to explain any special circumstances you wish to bring to the attention of your Financial Aid Officer. Please be as specific as possible, including dates, dollar amounts, and provide documentation when appropriate.

9. Statements and Signatures

I, the student, we, the parents, and student's spouse (if applicable) certify that all information presented is correct at this time and that I/we will send timely notice of any significant change in my/our family situation, family income or assets, or upon receipt of other scholarships or grants.

The student and at least one parent (and the student's spouse, if applicable) must sign this form. Typed signatures are not accepted.

Student's Signature _____ Parent's Signature _____

Date _____ Date _____

Spouse's Signature _____ Parent's Signature _____

Date _____ Date _____