BASIC EDUCATIONAL OPPORTUNITY GRANT (BEOG)

PURPOSE: The Basic Educational Opportunity Grant program is a federally funded project designed to provide eligible students with a "floor" of financial aid to help defray the costs of post-secondary education.

SOURCE OF FUNDS: Statutory authority for this program is the Higher Education Act of 1965, as amended by the Educational Amendments of 1972. The funds for this program are allocated to the student by the Department of Health, Education and Welfare. There is no state allotment formula and no institutional allocation formula. The Basic Grant follows the student and he can be assured of receiving his award without regard to the eligible school he chooses to attend.

STUDENT ELIGIBILITY: The student must be a citizen or permanent resident of the United States. He must have began his post-secondary education after April 1, 1973. He must be enrolled as a full-time student as defined by the institution of attendance. He must have demonstrated financial need as reflected by the nationally applied formula for determining eligibility.

APPLICATION PROCEDURES

1. SANTA BARBARA CITY COLLEGE:

Santa Barbara City College does not file an application
for funds but is extended a "line of credit" with HEW to fund eligible students.

2. STUDENTS:
The student must submit an application to an agency contracting with the Office of Education. The processing agency then returns to the student a "Student Eligibility Report", which notifies him of his eligibility. This document is then submitted to the institution of the student's choice. There is no charge to the student for the processing of his application.

DISBURSEMENT OF FUNDS: The authorizing legislation specifies that a student's maximum grant eligibility is $1,400 less the expected family contribution not to exceed one-half of the cost of attendance at the school the student wishes to attend. At Santa Barbara City College the maximum award will not exceed $762 per academic year. Grants in excess of $150 per semester will be distributed on a two payment per semester basis. Normally, the first payment may be expected during the first week of each semester and the second payment approximately at the beginning of the ninth week of each semester.
1. Will the BEOG program provide financial assistance for students from middle-income families?

Yes, indirectly. Awards made to students eligible for BEOG will release funds from other programs (CWS, NDSL, SEOG, EOP, etc.) traditionally used to meet the needs of low-income students. The released funds can then be used to assist students from income groups that previously have been denied aid due to a lack of funds.

2. How many students will receive assistance from the BEOG program during the fiscal year 1974-75?

During the 1974-75 school year it is anticipated that approximately 200 students will receive funds from the BEOG program.

3. How does the BEOG program affect the financial aid package an eligible student receives from Santa Barbara City College?

BEOG awards are included as part of our Santa Barbara City College financial aid award packages. The total package, including BEOG awards, cannot exceed the computed need analysis.

4. How much may an eligible student expect to receive from the BEOG program?

An eligible student will receive between $112 and $762 from the BEOG program. The exact amount is determined by the student's eligibility index number. The eligibility index number is determined by the Federal Government based on information supplied by the student and/or his/her parents.

5. How is the cost of education (student budget) determined?

All Santa Barbara City College students, dependent and independent, are on a $1504 academic year budget. The budget is determined by the Federal Government. It is broken down as follows: $1100 room and board, $400 books, supplies and miscellaneous expenses, plus mandatory fees.
TO THE BEOG APPLICANT: Your application for determination of Basic Grant eligibility has been received and processed. The results of your application are indicated by an “X” in one of the spaces below. (See reverse side for additional information.)

A. X

Your eligibility index of 131 establishes your financial need for purposes of the Basic Grant Program. For computation of the amount of your BEOG award, please submit all three copies of this Report to the Financial Aid Office at the school or college you plan to attend. See the reverse side for additional information.

B.

Your eligibility index of ... makes you ineligible for a BEOG award for the 1974-75 academic year. Please see the reverse side for additional information. The Financial Aid Office of the school or college you plan to attend may be able to provide you with information on other sources of financial aid for which you may be eligible.

C. 

Your application was not complete. Additional information is necessary, as indicated below. If you wish further consideration for a BEOG award, you must provide the information requested below immediately and return ONE completed copy to: BEOG, P.O. Box 1842, Washington, D.C. 20013.

READ THE REVERSE SIDE FOR INSTRUCTIONS.

YOU ARE ELIGIBLE FOR A BASIC GRANT THIS ACADEMIC YEAR. GRANTS ARE MADE ON THE BASIS OF A FORMULA. A LOWER ELIGIBILITY INDEX RESULTS IN A HIGHER GRANT. GRANTS WILL RANGE FROM $50 TO ABOUT $800.

TO THE SCHOOL: Please complete this section in accordance with the instructions in the BEOG Handbook, including the 1974-75 Payment Schedule.

SCHOOL: We certify that the applicant is an eligible student as defined under the regulations for the BEOG Program.

Institution Name: [Name]
City: [City]
State: [State]

Signed by: [Signature]
Date: [Date]

[Additional information and signatures]
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Application 1974-75

Basic
Educational
Opportunity
Grant
Program

Look into Basic Grants
GENERAL INFORMATION

The Basic Educational Opportunity Grant Program is a Federal aid program designed to provide financial assistance to those who need it to attend post-high school educational institutions. Basic Grants are intended to be the "floor" of a financial aid package and may be combined with other forms of aid in order to meet the full costs of education. The amount of your Basic Grant is determined on the basis of your own and your family’s financial resources.

You will be eligible for a grant if you meet several important criteria:

1. You have established your financial need by means of the BEOG application.
2. You began or will begin your post-high school education after April 1, 1973. If you have taken college courses while still attending high school or if you were enrolled in a remedial program before April 1, 1973, you are still eligible to apply for a Grant.
3. You will be enrolled in an eligible program at an eligible college, university, vocational or technical school, and you will be attending on a full-time basis.
4. You are a U.S. Citizen or are in the United States for other than a temporary purpose and intend to become a permanent resident or are a permanent resident of the Trust Territories of the Pacific Islands.

The Basic Educational Opportunity Grant Award is a grant and, unlike a loan, does not have to be repaid. It is estimated that during the 1974–75 academic year the awards will range between $50 and $800.

HOW TO APPLY

First, you should complete the application for determination of eligibility and send it in the envelope you received with these materials. Do not send money; your application will be processed free of charge.

Within four weeks you should receive a Student Eligibility Report (SER) which will indicate the results of your application.

The SER should be submitted to the Student Financial Aid Office at the institution in which you plan to enroll, where the amount of your Basic Grant will be calculated.

ADDITIONAL INFORMATION

If you need assistance in completing this form, contact the guidance counselor at your local high school or your student financial aid officer.

If you do not receive a response to your application within six weeks, you can write: BEOG, Box 1842, Washington, D.C. 20013. Be sure to include your name, address, and social security number.

For those applicants whose financial circumstances have changed significantly since 1973 (for instance, due to the unemployment or death of a parent), it may be possible to file a Supplemental form together with the application. This form will be available from your financial aid officer or by writing: BEOG, Box 2468, Washington, D.C. 20013.

Financial assistance may also be available to you through your State. In order to assist States having scholarship or other financial aid programs, the results of the computation of your Basic Grant “eligibility index” may be released to your State scholarship agency. The result will be released only to states with which the Office of Education has agreements to protect the confidentiality of this information. The data released to these State agencies will only be used to help you in obtaining the financial aid necessary to finance your post-high school education and training.
Instructions

It is important that you read the instructions while completing the form. If the form is completed correctly, your application can be processed without unnecessary delay. Every attempt has been made to include only those questions that are absolutely necessary. All information will, of course, be treated confidentially.

TO COMPLETE THE APPLICATION FORM:

—PLEASE REMOVE THE APPLICATION FORM CAREFULLY BEFORE COMPLETING IT.

—PLEASE PRINT ALL INFORMATION IN BALL-POINT PEN OR IN INK.

—AS YOU ENTER INFORMATION ON THIS APPLICATION, PLACE ONLY ONE LETTER OR NUMBER IN EACH SMALL BOX:

EXAMPLE: 1234567890

—ENTER AMOUNTS IN DOLLARS; OMIT CENTS. DO NOT LEAVE DOLLAR ITEMS BLANK; ENTER A ZERO (0) IF THE ITEM DOES NOT APPLY TO YOU. DO NOT USE WORDS SUCH AS “UNKNOWN,” “NONE,” OR “SAME.”

—SEND THE COMPLETED FORM TO:

BEOG PROGRAM
BOX 2264
WASHINGTON, D.C. 20013

SECTION A—APPLICANT INFORMATION

1-3. Enter the appropriate information. Your social security number must be provided in order to process the application.

4. If you have made a preliminary decision about the school or college you will most likely be attending during the 1974–75 academic year, enter its name and address. If you have not yet decided on a particular school, you may leave this item blank. Use abbreviations as necessary.

5-6. Enter the appropriate information. Use abbreviations when necessary. The State Code for addresses is printed at the right.

7. If you are single, without dependents, omit question 7. If you are married or have dependents, read both a and b below:

a. Enter the total size of your household. Include yourself, spouse and children who are dependent on you for more than half their support. Also include other persons who are related to you or living with you and for whom you provide more than half their support. If you are divorced or separated, do not include your spouse.

b. Enter the number of persons listed in item 7a above who will be attending post-high school educational institutions during the 1974–75 academic year. Include only those who will be attending on at least a half-time basis. Do not include family members who will be enrolled in elementary, junior high or high school during the 1974–75 academic year.

8. Enter the appropriate information.
SECTION B—PARENT INFORMATION

NOTE: Whenever the term “parent” is used, this means your mother or father or any person who provides, or did provide, more than half your support. If your parents are separated or divorced, only information which applies to the parent who provides the largest amount of your support should be submitted.

9-11. Enter the appropriate information.

12. Enter the total size of your parents’ household. Include yourself, parents, and children who are dependent on your parents for more than half their support. Also include other persons who are related to your parents or living with them and for whom they provide more than half their support.

13. Enter the number of persons listed in item 12 above who will be attending post-high school educational institutions during the 1974-75 academic year. Include only those who will be attending on at least a half-time basis. Do not include family members who will be enrolled in elementary, junior high or high school during the 1974-75 academic year.

SECTION C—APPLICANT STATUS

14. If you lived with your parent(s), or plan to do so, during 1973, 1974, or 1975, check YES for the appropriate years. You would check YES if you lived at home for any period of more than two consecutive weeks during that year.

15. If you were or will be listed as an exemption on your parent(s)’ Federal Income Tax Return for 1973, 1974 or 1975, check YES for the appropriate years.

16. If you received or expect to receive more than $600 in financial assistance from your parent(s) in 1973, 1974, or 1975, check YES for the appropriate years. Included under financial assistance are such items as room and board for periods you lived at home, clothes, medical and dental care, cash gifts, and cost of education. Estimate the value of such items in determining whether you received more than $600 in financial assistance from your parents.

IMPORTANT

If you checked YES for any year for any question (14, 15 or 16) in Section C, please complete only Section D, and sign. Instructions for Section D begin on this page.

If you checked NO for all years and all questions (14, 15 and 16) in Section C, please complete only Section E, and sign. Instructions for Section E begin on page 4.

SECTION D

Please complete items 17 thru 31 together with your parents, since they must supply the needed information on income, expenses, and assets. If your parents are separated or divorced, only information which applies to the parent who provides the largest amount of your support should be submitted.

NOTE: If your parents are residents of Puerto Rico, the Virgin Islands, Guam, American Samoa, or the Trust Territories and they filed an Income Tax Return with that Government in 1973, they should enter the information that corresponds to that requested in the items below.

Please enter zeroes for those items that do not apply to you or your parents. All figures should be entered in dollars; omit cents.

Enter $320.18 this way: 3 2 0 . 1 8
Enter $1,851.14 this way: 1 8 5 1 . 1 4
Enter $10,972.77 this way: 1 0 9 7 2 . 7 7

INCOME

17. Enter the number reported on line 7 of Federal Income Tax Return form 1040, or line 7 of form 1040A. If your parents are married and filed separately, enter the sum of their exemptions.

18. Enter the amount listed on line 15 of 1973 Federal Income Tax Return form 1040, or line 12 of form 1040A. If parents are married and filed separately, enter the sum of their Adjusted Gross Incomes. If your parents have not filed a Return for 1973 but will do so, enter the amount to be listed as Adjusted Gross Income. If your parents did not have to file a Return for 1973, enter a zero.

19. Enter that portion of item 18 that was earned through employment by: (a) father and (b) mother. Include only wages, salaries, and other income from employment that would be reported on a W-2 form. Do not include such income as alimony, dividends, or interest.

20. Enter the sum of the following types of other income your parent(s) received during 1973 (do not include any income already reported in item 18 above):

a. All Social Security benefits except those received for the applicant or educational benefits received by other members of the household; report applicant’s Social Security benefits only in item 29.

b. All veterans benefits except those received for the applicant or educational benefits received by other members of the household; report applicant’s veterans benefits for education (G.I. Bill or War Orphans’ and Widows Education Assistance) in item 33.

c. Welfare benefits—include amounts received through Aid to Families with Dependent Children and other similar programs.

d. Child support received for those children included in item 12 above.

e. Other—include any other income received in 1973 that was not subject to Federal Income Tax. Examples of such income are: interest on tax-free municipal bonds, untaxed portions of pensions, untaxed portions of capital gains, military subsistence and quarters allowances and untaxed earned income.

Do not include any amounts received from student aid programs such as educational loans, work-study programs, or scholarships.

21. Enter the amount of tax reported on line 18 of Federal Income Tax form 1040 or line 19 of form 1040A of Return(s) filed by your parent(s) whose income was reported in item 18 above. If parents have not filed a Return for 1973, but will do so, enter an estimate of the tax paid. Do not copy tax withheld on W-2 form. If they did not have to file a Return for 1973, enter a zero.

22. If your parents itemized their deductions on their 1973 Federal Income Tax Return, enter the sum of lines 2 and 6 from Schedule A, form 1040. If your parents took a standard deduction or did not have to file a Return for 1973, enter the amount of their household’s medical expenses.
# Application for Determination of Basic Grant Eligibility for 1974–75 Academic Year

**Basic Educational Opportunity Grant Program**

**Read Instructions First**

## A. Applicant Information

1. **Applicant's Social Security Number**
   - (1-2) ___________  (5-11) ___________  (31-30) ___________

2. **Applicant's Name**
   - Last Name: ___________  First Name: ___________

3. **Applicant's Birth Date**
   - Month: ___________  Day: ___________  Year: (42-43)

4. **Applicant's School or College for the 1974-75 Academic Year if such decision has been made. See Instructions.**
   - Name of School or College: __________________
   - City: ___________  State: ___________  Zip Code: ___________

5. **Applicant's Permanent Mailing Address:**
   - Number and Street: ___________  City: ___________
   - State Code: ___________  Zip Code: ___________

6. **Applicant's Marital Status:**
   - Single: ___________  Married: ___________  Divorced, Separated, Widowed: ___________

7. **If Applicant is Married or Has Dependents, Answer Both (a) and (b) Below:**
   - (a) Total size of Applicant's Household—Include applicant, spouse, dependent children, other dependents: ___________
   - (b) Number of Members of Household (including applicant) to be in post-high school educational institutions in 1974-75: ___________

8. **Has applicant attended a college, university, post-high school vocational or technical school at any time before April 1, 1973?**
   - Yes: ___________  No: ___________

## B. Parent Information

9. **Name of Parent**
   - Last Name: ___________  First Name: ___________

10. **Social Security Number**
    - Number: ___________

11. **Parents' Status:**
    - Married: ___________  Divorced, Separated, Widowed, Single: ___________

12. **Total Size of Parents' Household**
    - Include applicant, parents, dependent children, other dependents: ___________

13. **Number of Members of Household (Including Applicant) to be in Post-High School Educational Institutions in 1974-75:**
    - ___________

## C. Applicant's Status

14. **Did or Will Applicant Live with Parents During Each Year?**
    - Yes: ___________  No: ___________

15. ** Applicant is a U.S. Citizen or Will Be Listed as an Exemption on Parents' Federal Income Tax Return During Each Year?**
    - Yes: ___________  No: ___________

16. **Did or Will Applicant Receive $600 or More in Financial Assistance from Parents During Each Year?**
    - Yes: ___________  No: ___________

**If: You Answered Yes for Any Question for Any Year in Section C, Complete Only Section D on the Next Page, and Sign.**

**Or: If You Answered No for All Years and All Questions in Section C, Complete Only Section E on the Next Page, and Sign.**
from the following list (do not include the amount of medical and dental expenses covered by insurance):

- Payments for medicines, prescription drugs, and vaccines.
- Payments to hospitals, doctors, dentists, and nurses.
- Payments for false teeth, eyeglasses, medical and surgical aids.
- Payments for ambulance service and other travel costs necessary to get medical care.

23. If your parents itemized their deductions on their 1973 Federal Income Tax Return, enter the amount reported on line 29 of Schedule A (form 1040). If your parents took a standard deduction or did not have to file a Return for 1973, determine the amount of each loss, not covered by insurance, due to theft or property lost or damaged by fire, storm, car accident, shipwrecks, etc. Subtract $100 from the amount of each loss. Total the net amount of each of these losses and enter this sum.

NOTE: for a complete description of the expenses for items 22 and 23, see Instructions for form 1040 for Federal Income Tax Return.

**ASSETS**

NOTE: In completing items 24–27, do not report any asset more than once.

24. a. Enter the estimated present market value of your parents’ home.
   b. Enter the amount of present unpaid mortgage or related debts on that home.

25. a. Enter the sum of the estimated present market value of other real estate your parents own (report farm and business only in items 26 and 27 below) and the total market value of your parents’ investments, including stocks, bonds, and other securities.
   b. Enter the sum of the amount of present unpaid mortgage or related debts on that real estate and the amount of debts against your parents’ investments.

26–27. a. Enter the market value of your parents’ business or farm (including value of buildings, machinery, etc.). Do not include home if it was listed in item 24.
   b. Enter the amount of unpaid mortgage or related debts on the business or farm. If parents own part of a business (farm), enter only the value of their share of the business (farm), and only their share of unpaid mortgage.

28. Enter the appropriate amount.

**APPLICANT**

29. a. Enter the amount of benefits per month you expect to receive between July 1, 1974 and June 30, 1975. Include only those Social Security benefits that you receive because you are or will be a student. If you do not know this amount, you may obtain this information from the Social Security Administration’s District Office which services your claim.
   b. Enter the number of months you expect to receive Social Security educational benefits between July 1, 1974 and June 30, 1975.

30. a. Enter the amount of the benefits per month you expect to receive between July 1, 1974 and June 30, 1975, as part of the Veterans Educational Assistance—G.I. Bill Program. Also include the amount per month you expect to receive under the War Orphans’ and Widows’ Education Assistance Program. Include only those amounts that you receive because you are or will be a student.
   b. Enter the number of months you expect to receive veterans educational benefits between July 1, 1974 and June 30, 1975.

31. Enter the sum of your present savings and the present net value of your other assets, including investments, real estate, inheritances, and trust funds. Do not include your automobile, stamp or coin collection, or other personal property or any amounts received through educational loans.

Please check again to make sure every item has been completed, and that zeroes have been entered for those items that do not apply to you or your parent(s).

You and your parent(s) should read the final statement carefully and sign in the appropriate places. Applications which are not signed will be returned.

**SECTION E**

Please complete items 32 through 45 and sign the statement at the bottom. Items apply to both you and your spouse unless you are separated or divorced.

NOTE: If you are a resident of Puerto Rico, the Virgin Islands, Guam, American Samoa, or the Trust Territories and filed an Income Tax Return with the government in 1973, you should enter the information that corresponds to that requested in the items below.

Please enter zeroes for those items that do not apply to you (or your spouse). All figures should be entered in dollars; omit cents.

- Enter $320.18 this way: 320.18
- Enter $1,851.14 this way: 1851.14
- Enter $10,972.77 this way: 10972.77

**INCOME**

32. Enter the number reported on line 7 of Federal Income Tax Return form 1040 or line 7 of form 1040A. If you and your spouse are married and filed separately, enter the sum of your exemptions.

33. Enter the amount reported on line 15 of 1973 Federal Income Tax Return form 1040, or line 12 of form 1040A. If you and your spouse are married and filed separately, enter the sum of your Adjusted Gross Incomes. If you have yet to file a Return for 1973 but plan to do so, enter the amount to be listed as Adjusted Gross Income. If neither you nor your spouse had to file a Return for 1973, enter a zero. Do not include any income received as the result of employment provided by student aid programs.
34. Enter that portion of item 33 that was earned through employment by: (a) applicant and (b) spouse. Include only wages, salaries, and other income from employment that would be reported on a W–2 form, except any income received as the result of employment provided by student aid programs. Do not include such income as alimony, dividends, or interest.

35. Enter the sum of the following types of income you or your spouse received during 1973 (do not include any income you reported in item 33):
   a. All Social Security benefits except those you received or educational benefits received by other members of your household; report your Social Security educational benefits only in item 44.
   b. All veterans benefits except those you received or educational benefits received by other members of your household; report your veterans benefits for education (G.I. Bill and War Orphans’ and Widows’ Education Assistance) in item 45.
   c. Welfare benefits—include amounts received through Aid to Families with Dependent Children and other similar programs.
   d. Child support received for those children included in item 7a above.
   e. Other—include any other income received in 1973 that was not subject to Federal Income Tax. Examples of such income are: military subsistence and quarters allowances, untaxed portions of pensions, untaxed portions of capital gains, income from tax-free municipal bonds, and untaxed earned income.

Do not include any amounts received from student aid programs such as educational loans, work-study programs, or scholarships.

36. Enter the amount of tax reported on line 18 of Federal Income Tax Return form 1040 or line 19 of form 1040A. If you and your spouse filed separately, enter the sum of your Federal Income Taxes paid. If you have not filed a Return for 1973 but will do so, enter an estimate of the tax to be paid. Do not copy tax withheld on W–2 form. If you and your spouse did not have to file a Return for 1973, enter a zero.

37. If you and your spouse itemized your deductions on your 1973 Federal Income Tax Return, enter the sum of lines 2 and 6 from Schedule A (form 1040). If you and/or your spouse took a standard deduction or did not have to file a Return for 1973, enter the amount of your household’s medical expenses from the following list (do not include the amount of medical and dental expenses covered by insurance):
   a. Payments for medicines, prescription drugs, and vaccines.
   b. Payments to hospitals, doctors, dentists, and nurses.
   c. Payments for false teeth, eyeglasses, medical and surgical aids.
   d. Payments for ambulance service and other travel costs necessary to get medical care.

38. If you and your spouse itemized your deductions on your 1973 Return, enter the amount reported on line 29, Schedule A (form 1040). If you and/or your spouse took a standard deduction or did not have to file a Return for 1973, determine the amount of each loss, net covered by insurance, due to theft or property lost or damaged by fire, storm, car accident, shipwrecks, etc. Subtract $100 from the amount of each loss. Total the net amount of each of these losses and enter the sum.

NOTE: for a complete description of the expenses for items 37 and 38, see instructions for Federal Income Tax Return form 1040.

ASSETS

NOTE: In completing items 39–42, do not report any asset more than once.

39. a. Enter the estimated present market value of your home.
   b. Enter the amount of present unpaid mortgage or related debts on that home.

40. a. Enter the sum of the estimated present market value of other real estate you may own (report farm and business only in items 41 and 42 below) and the total market value of your investments, including stocks, bonds, and other securities.
   b. Enter the sum of the amount of present unpaid mortgage or related debts on that real estate and the amount of debts against your investments.

41–42. a. Enter the market value of your business or farm (including value of buildings, machinery, etc.). Do not include home if it was listed in item 39.
   b. Enter the amount of unpaid mortgage or related debts on your business or farm. If you own part of a business (farm), enter only the value of your share of business (farm), and only your share of unpaid mortgage.

43. Enter the appropriate amount. Do not include any amounts received through educational loans.

APPLICANT

44. a. Enter the amount of benefits per month you expect to receive between July 1, 1974 and June 30, 1975. Include only those Social Security benefits that you receive because you are or will be a student. If you do not know this amount, you may obtain this information from the Social Security Administration’s District Office that services your claim.
   b. Enter the number of months you expect to receive Social Security educational benefits between July 1, 1974 and June 30, 1975.

45. a. Enter the amount of the benefits per month you expect to receive between July 1, 1974 and June 30, 1975 as part of the Veterans Educational Assistance—G.I. Bill Program. If you do not know this amount, contact your local Veterans Administration office. Also include the amount per month you expect to receive under the War Orphans’ and Widows’ Education Assistance Program. Include only those amounts that you receive because you are or will be a student. Do not include your spouse’s veterans benefits for education.
   b. Enter the number of months you expect to receive veterans educational benefits between July 1, 1974 and June 30, 1975.

Please check again to make sure every item has been completed, and that zeroes have been entered for those items that do not apply to you or your spouse.

Please read the final statement carefully. You should sign in the appropriate place, along with your spouse. Applications which are not signed will be returned.
If you are interested in specific information on the method used in determining your Basic Grant Eligibility Index, please write to: BEOG, P.O. Box 2468, Washington, D.C. 20013. Ask for a copy of "Basic Grant Eligibility."