



NEXT GENERATION SCHOLARS Prequalification Worksheet 2022-2023 Academic Year

This worksheet is provided to non-profit organizations to collect the required information to verify each Next Generation Scholar (NGS) prequalifies for the annual income requirements to qualify for the Guaranteed Access (GA) Grant Award.

Non-Profit Organization

Organization name: _____ Organization contact: _____

Telephone number: _____ Email address: _____

Student Last Name: _____ Student First Name: _____ MI: _____

Student Date of Birth: ____/____/____ (MM/DD/YYYY) Last 4 digits of Student SSN/ITIN:

Mailing Address: _____

Email Address: _____ Telephone Number: _____

Current School Name: _____

Household Information

Parents must report the type and amount of ALL sources of income received in the household during the most recent tax year.

➤ **Who should I include as members of my household?**

You must count all people living in your household, related or not (such as grandparents, other relatives, or friends) who share income and expenses.

➤ **What is considered to be my household income?**

Household income is any money received on a recurring basis, including gross earned income. Gross earned income means all money received before such deductions as income taxes. Income includes but is not limited to: earnings from work, net income from self-owned businesses (cannot be less than \$0), unemployment and worker's compensation, welfare, child support, alimony, and retirement and disability benefits.

➤ **What is considered "Other" income?**

- Regular contributions from persons not living in household
- Any other income Total

Total Number of Members in Household: _____

Student Income

\$ _____
Work

\$ _____
TANF

\$ _____
Alimony

\$ _____
Disability

\$ _____
Self-Employment

\$ _____
Social Security

\$ _____
Other

☐ Place a check in the box if the student did not work

Parent/Legal Guardian Income

Parent Last Name: _____

Parent First Name: _____

Last 4 digits of Student SSN/ITIN:

Email Address: _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Work

TANF

Alimony

Disability

Self-Employment

\$ _____
Social Security

\$ _____
Other

☐

Place a check in the box if the parent did not work and submit the IRS Non Tax Filing Statement.

Other Household Member

Relationship Type: ☐ Parent/Stepparent ☐ Legal Guardian

Last Name: _____

First Name: _____

Last 4 digits of Student SSN/ITIN:

Email Address: _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Work

TANF

Alimony

Disability

Self-Employment

\$ _____
Social Security

\$ _____
Other

☐

Place a check in the box if the parent did not work and submit the IRS Non Tax Filing Statement.

Documentation must be included when submitting this worksheet for all income sources reported for the student/parent/legal guardian.

Student and Parent/Guardian Certification

By signing this worksheet, I certify that all of the above information is true and correct, including all income information that has been listed above.

- ✓ I understand that this worksheet is to prequalify for the Guaranteed Access Grant award as a Next Generation Scholar when enrolled in middle/high school.
- ✓ As a student, parent or legal guardian, I agree to provide the non-profit organization with documentation in accordance with the Maryland Higher Education Commission guidelines to verify information on this application including tax forms, W-2 forms and any other supporting documentation.
- ✓ I understand that misrepresentation will terminate my eligibility to prequalify for the Guaranteed Access Grant award and may subject me to prosecution under applicable state and federal laws.
- ✓ I understand that the information provided in this worksheet must be submitted to the non-profit organization by the established deadline or I will no longer be eligible to prequalify for the Guaranteed Access Grant award as a Next Generation Scholar.

Student's Signature

Date

Parent's Signature

Date