

University of Washington School of Medicine
2020-21 Scholarship Application Packet

Introduction

The School of Medicine (SOM) need-based scholarship is for current University of Washington (UW) medical students. It is composed of over 200 need-based scholarship funds that are constantly changing. The SOM Financial Aid Office (FAO) requires students to apply to the SOM general scholarship and then SOM FAO staff match students to the appropriate funds. We have intentionally designed the scholarship in this manner to eliminate confusion and save students the time of reading through hundreds of funds to determine which is the best for them to apply to.

Students who will be enrolled for the 2020-21 academic year are eligible to apply for the SOM Scholarship. It is a need-based scholarship determined by parent and student information on the Free Application for Federal Student Aid (FAFSA). If you did not initially include parent information on the [FAFSA](#), you can update it without impacting your initial submission date.

The deadline for current students is **April 30, 2020 11:59 pm PT**.

Incoming MS1 students will have a deadline of two months following receipt of the scholarship announcement.

Students admitted off the alternate list, please email somfao@uw.edu for more information.

Late applications will not be reviewed unless there are extenuating circumstances.

If, you still have questions after reading this packet in its entirety, please send an email to somfao@uw.edu.

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How To Apply

- Include parent information on the 2020-21 [FAFSA](#) *regardless* of student age or marital status
- Submit scholarship [application survey](#)
- Submit 2018 parent federal tax returns via an [Information Update](#)
- Optional: Bio-sketch (see below for more information)*

Appeals

The Financial Aid Office may review an appeal to exclude parent tax information from a student's application. Appeals are **only** considered if the student's scholarship application is complete and the required parent tax return documents have been submitted prior to the deadline.

If any of these situations apply to you, please complete the appeals form located on page 7 of this packet and upload an [Information Update](#) by **May 31, 2020**.

- Parent tax information has changed significantly since 2018
- Parent marital status has changed since 2018
- Student was emancipated from their parents at a young age and have had no contact since
- Student is over 30 and has supported themselves independently for at least five years
- Student is married and/or has children and has supported themselves independently for at least six years

Bio-sketch

The bio-sketch is an *optional* essay that is used to determine eligibility for larger scholarships and scholarships with specific criteria. Please read the guidelines below prior to submitting your bio-sketch as an [Information Update](#). You can submit multiple Information Updates, so if you forget to include your bio-sketch with your tax returns, simply submit a second Information Update.

Guidelines:

- Include **name, student ID, entering class year (E##)** and **Foundations site** in the top, left corner
- Maximum Length: 1 page, double spaced
- Format: PDF only
- Write in 1st person (*do not* submit a CV)
- Answer any of the following questions related to your medical school experience:
 - Describe one of your current leadership roles and how it has impacted you.
 - What specialties are you interested in and why?
 - Have you conducted any research and how does it apply to your medical interests?
 - How has a volunteer or service activity influenced your pursuit of a career in medicine?

Parent Federal Tax Return Directions

Students must submit a signed copy of their parents' 2018 federal tax returns (Form 1040). If your parents are married filing separately or unmarried living together, both parents' tax returns must be submitted.

We only need certain pages of the federal tax return. Please see screenshots below to determine which page(s) you need to submit. If you do not submit all the required documents, you will be contacted by somfao@uw.edu with a request for additional documents. **You have two weeks from receiving that email to submit the correct documents.** If you do not submit the additional documents by the two-week deadline, your application will be marked incomplete and rejected.

Please upload all tax documents as an [Information Update](#). As you are completing the form, be sure to follow these instructions:

- Select "2020-21" as the academic year you want to update.
- Select "I want to submit requested documents."
- In Section 2, under "Parent(s) Documents", select appropriate option(s) for the documents you are submitting.

Parent Federal Tax Return Exceptions:

- If both parents are deceased, upload a copy of their death certificates as an [Information Update](#) the first year you apply for the SOM scholarship. If you have previously provided a death certificate to SOM FAO, you do not need to upload one.
- If your parents remarried after you became independent AND your step-parents have never provided support, please schedule an [appointment](#) to speak with a financial aid counselor.
- If your parents are US residents and do **not** file taxes, they can submit a Verification of Non-Filing Letter (Form 4506) for 2018 from the [Internal Revenue Service](#).
- If your parents are not US residents and do not pay US taxes, please provide a copy of their country's tax form from 2018 as an [Information Update](#). It must be translated.

Student Checklist

Required Documents:

- 1040 page 1 *with parent signature*
- 1040 page 2

Additional Documents That May Be Needed: *(double check screenshots)*

- W2s
- Schedule 1
- Schedule A
- Schedule C or C-EZ
- Schedule D
- Schedule E

Required Federal Tax Return Documents (1040 Page 1 and 2)

Form **1040** Department of the Treasury—Internal Revenue Service (99) **2018** U.S. Individual Income Tax Return OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

Filing status: Single Married filing jointly Married filing separately Head of household Qualifying widow(er)

Your first name and initial _____ Last name _____ Your social security number _____

Your standard deduction: Someone can claim you as a dependent You were born before January 2, 1954 You are blind

If joint return, spouse's first name and initial _____ Last name _____ Spouse's social security number _____

Spouse standard deduction: Someone can claim your spouse as a dependent Spouse was born before January 2, 1954 Full-year health care coverage or exempt (see inst.)

Spouse is blind Spouse itemizes on a separate return or you were dual-status alien

Home address (number and street). If you have a P.O. box, see instructions. _____ Apt. no. _____ Presidential Election Campaign (see inst.) You Spouse

City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6. _____ If more than four dependents, see inst. and here

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see inst.):	
(1) First name	Last name			Child tax credit	Credit for other dependents
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Sign Here
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

Your signature _____ Date _____ Your occupation _____ If the IRS sent you an Identity Protection PIN, enter it here (see inst.) _____

Spouse's signature. If a joint return, both must sign. _____ Date _____ Spouse's occupation _____ If the IRS sent you an Identity Protection PIN, enter it here (see inst.) _____

Paid Preparer Use Only

Preparer's name _____ Preparer's signature _____ PTIN _____ Firm's EIN _____ Check if: 3rd Party Designee Self-employed

Firm's name _____ Phone no. _____

Firm's address _____

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 11320B Form **1040** (2018)

- You must submit a **signed tax return**. Please ensure your parents' signatures are included or the information of a paid preparer is listed (e.g. an accountant, Turbo Tax, etc.).

Form 1040 (2018) Page **2**

Attach Form(s) W-2. Also attach Form(s) W-2G and 1099-R if tax was withheld.

1 Wages, salaries, tips, etc. Attach Form(s) W-2		1
2a Tax-exempt interest	2a	2b Taxable interest
3a Qualified dividends	3a	3b Ordinary dividends
4a IRAs, pensions, and annuities	4a	4b Taxable amount
5a Social security benefits	5a	5b Taxable amount
6 Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22		6
7 Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6		7
8 Standard deduction or itemized deductions (from Schedule A)		8
9 Qualified business income deduction (see instructions)		9
10 Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-		10
11 a Tax (see inst.) (check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input type="checkbox"/> Form 4972 3 <input type="checkbox"/>)		11
b Add any amount from Schedule 2 and check here <input type="checkbox"/>		11
12 a Child tax credit/credit for other dependents b Add any amount from Schedule 3 and check here <input type="checkbox"/>		12
13 Subtract line 12 from line 11. If zero or less, enter -0-		13
14 Other taxes. Attach Schedule 4		14
15 Total tax. Add lines 13 and 14		15
16 Federal income tax withheld from Forms W-2 and 1099		16
17 Refundable credits: a EIC (see inst.) b Sch. 8812 c Form 8863		17
18 Add lines 16 and 17. These are your total payments		18
19 If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid		19
20a Amount of line 19 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>		20a
b Routing number c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
d Account number		
21 Amount of line 19 you want applied to your 2019 estimated tax		21
Amount You Owe 22 Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions		22
23 Estimated tax penalty (see instructions)		23

Go to www.irs.gov/Form1040 for instructions and the latest information. Form **1040** (2018)

- If there is a number in box 1, you must submit W2s, if received.
- If there is a number next to line 22 in row 6, you must submit a Schedule 1.
- If there is a number in box 8, you must submit a Schedule A, **unless** a standard deduction was chosen.

Additional Federal Tax Return Documents That May Be Needed

SCHEDULE 1 (Form 1040) Department of the Treasury Internal Revenue Service	Additional Income and Adjustments to Income ▶ Attach to Form 1040. ▶ Go to www.irs.gov/Form1040 for instructions and the latest information.	OMB No. 1545-0074 <div style="font-size: 2em; font-weight: bold; text-align: center;">2018</div> Attachment Sequence No. 01
Name(s) shown on Form 1040		Your social security number
Additional Income	1-9b Reserved 10 Taxable refunds, credits, or offsets of state and local income taxes 11 Alimony received 12 Business income or (loss). Attach <u>Schedule C or C-EZ</u> 13 Capital gain or (loss). Attach <u>Schedule D</u> if required. If not required, check here <input type="checkbox"/> 14 Other gains or (losses). Attach Form 4797 15a Reserved 16a Reserved 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. <u>Attach Schedule E</u> 18 Farm income or (loss). Attach Schedule F 19 Unemployment compensation 20a Reserved 21 Other income. List type and amount ▶ 22 Combine the amounts in the far right column. If you don't have any adjustments to income, enter here and include on Form 1040, line 6. Otherwise, go to line 23	1-9b 10 11 12 13 14 15b 16b 17 18 19 20b 21 22
Adjustments to Income	23 Educator expenses 24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 25 Health savings account deduction. Attach Form 8889	23 24 25

- If there is a number in box 12, you must submit a [Schedule C](#) or [C-EZ](#)
- If there is a number in box 13, you must submit a [Schedule D](#)
- If there is a number in box 17, you must submit a [Schedule E](#)

a Employee's social security number		Safe, accurate, FAST! Use Visit the IRS website at www.irs.gov/efile	
b Employer identification number (EIN)		1 Wages, tips, other compensation	2 Federal income tax withheld
c Employer's name, address, and ZIP code		3 Social security wages	4 Social security tax withheld
		5 Medicare wages and tips	6 Medicare tax withheld
		7 Social security tips	8 Allocated tips
d Control number		9 Verification code	10 Dependent care benefits
e Employee's first name and initial Last name Suffix		11 Nonqualified plans	12a See instructions for box 12
		13 <input type="checkbox"/> Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay	12b
		14 Other	12c
			12d
f Employee's address and ZIP code		15 State Employer's state ID number	16 State wages, tips, etc.
		17 State income tax	18 Local wages, tips, etc.
		19 Local income tax	20 Locality name

Form **W-2** Wage and Tax Statement

2018

Department of the Treasury—Internal Revenue Service

Copy B—To Be Filed With Employee's FEDERAL Tax Return. This information is being furnished to the Internal Revenue Service.

- Please note W2s can vary significantly in appearance, however, most will contain the text in the red box somewhere on the page.

Frequently Asked Questions

Will I be eligible?

Until the FAO reviews your parent information in the system, it can be very difficult to determine eligibility as each student's situation can vary wildly. We make no assurances on eligibility.

You ask about members in my parents' household. Who does that include?

The parent household includes:

- Parent(s)
- Step-parent (if FAFSA parent remarried)
- Children under 24, if in an undergraduate program and receiving support from parents
- Medical student (students in graduate programs are not usually included in parent household size but we allow medical students to count themselves)
- Dependents listed on tax forms (you may be asked for additional, clarifying information)

How does a scholarship impact my loans?

A student's financial aid award (scholarship, grants, loans, etc.) cannot exceed their Budget/Cost of Attendance. If a student's budget is fully met by loans, we will reduce the highest interest loan first.

Why do I have to submit my parents' information?

With limited funds, SOM FAO takes parent resources into account for the SOM Scholarship. Our scholarship is need-based and intended to help reduce student loan debt.

Are there any exceptions to submitting parent information?

Please see criteria on page two for appeals. If you are still uncertain, we recommend scheduling an [appointment](#) to speak with a financial aid counselor to discuss your individual circumstances.

Why aren't I considered independent?

Medical students are considered independent for the federal loans they receive (Unsubsidized Stafford and Graduate Plus loans). SOM FAO does not count your parents' income as a resource, however, we use it to help determine eligibility for the scholarship.

Will submitting parent information limit what loans I can get?

No. Student eligibility for Unsubsidized Stafford and Graduate Plus loans is based entirely on their own information. Providing parent information potentially increases a student's access to scholarship funds.

How can I verify my application is complete?

After completing the application survey, a confirmation will appear. We recommend printing/saving a copy. You can also log into [MyUW](#) to verify your documents have been received. Be sure to click the 'documents' tab on the left hand navigation. Your submitted documents show up like this:

Document	Requested Date	Received Date	Reviewed Date	Status
 Information Update Form	Received	3/06/2020	Not Reviewed	Pending Review

 No action required

University of Washington, School of Medicine Scholarship
Appeals Request to Exclude Parent Tax Return

Name:	
Student ID:	
Foundations Site:	
Entering Year:	

Please select which situation applies to you:

- My appeal was approved in a prior year and nothing has changed
- Parent tax information has changed significantly since 2018
- Parent marital status has changed since 2018
- Student was emancipated from their parents at a young age and have had no contact since
- Student is over 30 and has supported themselves independently for at least five years
- Student is married and/or has children and has supported themselves independently for at least six years
- Other

Please provide any details regarding your situation that may be helpful when considering your appeal (500 words max.)