Welcome to the 2019 ADEA AADSAS Fee Assistance Program (ADEA AADSAS FAP).

ADEA AADSAS FAP is a fee assistance program designed to assist students who demonstrate extreme financial need while applying to ADEA AADSAS. ADEA AADSAS FAP is an independent program offered by ADEA AADSAS and is not affiliated with any government, college or university, scholarship, grant or fellowship program. Approval for a fee assistance is at the sole discretion of ADEA.

All applicants, including the applicant’s parent/guardian and spouse, must be U.S. Citizens or Permanent Residents.

New for the 2019 ADEA AADSAS Fee Assistance Program!

Great News! 2019 ADEA AADSAS FAP applicants will be able to submit a request for fee assistance starting May 15, 2018, to be considered for fee assistance at the start of the 2019 ADEA AADSAS Cycle, June 5, 2018. ADEA AADSAS will initiate a soft launch of the 2019 ADEA AADSAS application on May 15, 2018, which gives ADEA AADSAS applicants the opportunity to create and start completing the 2019 ADEA AADSAS application. All FAP Applicants will have to create a 2019 ADEA AADSAS account and receive their CAS id# before submitting documents to FAP. The CAS id# number and email address must be placed on the 2019 ADEA AADSAS FAP Cover Form, and this form must accompany all required documents sent to ADEA AADSAS FAP. Applicants will have only one chance to submit all required supporting documents.

All FAP applicants that submit a request for fee assistance in mid May 2018, will not receive a decision from ADEA AADSAS until the first week in June 2018, at the start of the 2019 ADEA AADSAS application cycle. All ADEA AADSAS applicants will have to wait until June 5, 2018, to submit the 2019 ADEA AADSAS application. Applicants approved for FAP the first week of June 2018, will have 14 calendar days from the date of approval to submit the 2019 ADEA AADSAS application. If an ADEA AADSAS application is submitted after the 14-calendar day approval time, the FAP decision will be revoked.

**Reminder – FAP applicants that request fee assistance in May 2018 during the soft launch of the 2019 ADEA AADSAS application will not receive a decision from FAP until the first week of June 2018, at the start of the 2019 ADEA AADSAS Cycle.**
The total income for applicant and family must not exceed 200% of the 2017 U.S. Poverty Guidelines. Use the numbers located in the left column (Persons in Family/household) to determine the number of individuals in your household. Use the ADEA Poverty Guideline 200% (far right column) to determine the maximum income allowed for the number of family members. The total income should not exceed the 200%.

Applicants who are interested in applying for fee assistance must have created a 2019 ADEA AADSAS account and have received a CAS ID#. The CAS ID#, along with your email address must be placed on the 2019 ADEA AADSAS FAP Cover Form (located on the last page of the FAP instructions.)

If you are applying for fee assistance, you must:

- Read and follow all FAP instructions carefully.

- Create an ADEA AADSAS account and receive your CAS ID# (very important)

- Enter your CAS id# onto the 2019 ADEA AADSAS FAP Cover Form along with your email address.

- Submit the 2019 ADEA AADSAS FAP Cover Form (required) and all required supporting documents.

- Wait for a decision from ADEA AADSAS FAP via email, (within four to five business days of making the request), to submit the ADEA AADSAS Application.
The ADEA AADSAS application should not be submitted until a decision on your ADEA AADSAS FAP request has been rendered. Submitting an ADEA AADSAS application prior to receiving a status notification for fee assistance will result in an automatic withdrawal of your ADEA AADSAS FAP request.

ADEA AADSAS FAP Launch Date

The ADEA AADSAS FAP will start to accept all FAP request, as early as May 15, 2018, during the soft launch of the 2019 ADEA AADSAS application, and remains available until all funds are expended or February 1, 2019, which is the ADEA AADSAS Application deadline.

Required Supporting Documents (These documents must be accompanied by the ADEA AADSAS FAP Cover Form and CAS ID#)

- **Applicants born after January 1, 1993** must submit self, parents/guardians, and spouse (if married) 2017 1040 tax returns, W2s/1099s, and Schedule A (if itemizing deductions).

- **Applicants born before January 1, 1993** must submit self and spouse (if married) 2017 1040 tax returns, W2s/1099s, including schedule A (if itemizing deductions).

- Applicants enrolled in a college/university for the 2017–2018 academic year, and receiving financial aid, must submit a Financial Aid Award Notification (downloaded from the institution’s website).

- Applicants must submit a “2019 ADEA AADSAS Income Verification Form” if you have additional income that may not show on the 2017 1040 tax returns.

- If the applicant is unable to submit any of the required supporting documents listed on the 2019 ADEA AADSAS FAP Cover Form, **including the 2017-2018 Financial Aid Award Notification**, the applicant must write a letter of explanation. If a letter of explanation is not included, the applicant will be denied fee assistance automatically.

* Note: Tax return transcripts will not be accepted or processed. *
Fee Assistance Benefits
Applicants approved for fee assistance will receive a total of $449 in fee waivers which will cover the initial ADEA AADSAS Program designation ($245) and two additional program designations ($102 each) for a total of three designations. The amount of fee assistance granted will be subtracted from the total fees you must pay. **If you choose to submit your ADEA AADSAS application with fewer than three dental program designations, you will only receive fee assistance for the number of programs you designate initially. The remaining funds are forfeited and cannot be used in the future.** Applicants must click the “Submit All” button when submitting the ADEA AADSAS application to receive fee assistance for all three dental programs designated.

Processing Request:
Applicants are responsible for mailing the “2019 ADEA AADSASS FAP Cover Form” and all required supporting documents (check FAP Cover Form for a list of required documents). Applicants have only one opportunity to submit the required supporting documents, and all documents must be received at one time with the 2019 ADEA AADSAS FAP Cover Form. Any documents received without the FAP Cover Form will not be processed.

- Upon the receipt of the applicants’ 2019 ADEA AADSAS FAP Cover Form, along with the CAS id#, email address, and all required supporting documents, processing starts and will take approximately four to five business days for applicants to receive a decision.

- Please contact FAPAADSAS@adea.org with any inquiries regarding the status of your FAP request. **Any documents received without the correct CAS id# will not be processed and the applicant is no longer eligible to receive fee assistance for the 2019 ADEA AADSAS Application cycle.**

- If the applicant submits the ADEA AADSAS application before the FAP decision has been given, you will no longer be eligible to receive FAP.

- **ADEA AADSAS FAP Decisions:**
  - Approved – applicants approved for a fee waiver will have 14 calendar days from the date of the FAP approval to submit the 2019 ADEA AADSAS Application.
  - Denied – applicants denied for fee assistance can submit the ADEA AADSAS Application at any time until February 1, 2019.
How to Submit Your Application After You Have Been Granted Fee Assistance

Applicants approved for fee assistance will receive a total of $449 in fee assistance which will cover the initial ADEA AADSAS dental program designation ($245) and two additional dental program designations ($102 each) for a total of three designations. The amount of fee assistance (three designations) granted will be subtracted from the total fees you must pay.

To redeem the full amount of FAP granted, THREE (3) designations must be ready for submission at the time you submit your application. You must designate three dental programs and click the “Submit All” button to receive fee assistance for all three programs. If you do not click the ‘submit all’ button, and submit one program at a time, you will only receive fee assistance for the first program you designate and submit. No additional fee assistance will be offered, and the remaining funds are forfeited and cannot be used.

When you select the Submit Application tab in your application, you will find a large blue “Submit All” button near the top of the page and individual submit buttons for each program that is complete and ready to submit. Please look at the example below:

![Submit All button example]

Do not use the individual submit buttons. Click on the blue “Submit All” button. You will then be prompted to select the designations to which you wish to submit (do not click one button at a time.) Only the dental school designations that are ready for submission will appear on this page. Click the blue + buttons to add the desired designations to your cart.
This applicant only has two dental school programs ready for submission. **If you see only one or two designations available to select, but you intend to apply to three or more, DO NOT SUBMIT!** Go back to My Application and complete the Program Materials for additional dental schools. Once you have three dental school designations ready to submit, you will be able to redeem the full amount of your FAP.

After clicking on the buttons to select your designations, the blue “Continue” button will appear. Above it, the Fee Total will reflect your total application fees minus your fee assistance. If you have designated more than three schools, your Fee Total will reflect fees for the number of schools you have designated minus three (3).

When you click on “Continue”, you will be prompted to enter your payment information for any remaining fees. If you have any questions or difficulty with submitting to the correct number of designations, do not submit! Call ADEA AADSAS Customer Service for assistance at (617) 612-2045. Our representatives are available to help you submit from 9 AM to 5 PM Eastern Standard Time on weekdays.

Any required supporting documents received without the 2019 ADEA AADSAS FAP Cover Form and CAS ID# will not be processed, and your FAP request will be denied automatically.

*Please mail the 2019 ADEA AADSAS FAP Cover Form and all required supporting documents to:*

2019 ADEA AADSAS FAP  
655 K Street N.W.  
Suite 800  
Washington, D.C.  20001
2019 ADEA AADSAS® Fee Assistance Program (FAP)
Income Verification Form

Applicant Name

2019 ADEA AADSAS CAS ID #

Type of Verification Being Supplied for Calendar Year 2017: Please ✓ all that pertain to you

- Child Support Payments
- Supplemental Nutrition Assistance Program (SNAP)
- Proof of Social Security Benefits
- Proof of Veteran’s Benefits
- Proof of Workers’ Compensation Benefits
- Proof of Housing, Food and Other Living Allowances
- Other

If you ✓ “Other”, please explain ________________________________________________

Benefit Recipient Information

Name of person who received benefits: _____________________________________________

Relationship to student_________ # of years benefits were received: ____________________

Once you have selected the type of verification being supplied, please attach a copy of the letter (required document) from the appropriate county/state office indicating the monthly amount of support received in the year indicated above and include this document with the required supporting documents. This form is required if the applicant is receiving any of the benefits listed above.

By signing this document, I/we certify that all the information is complete and correct.

____________________________ _________________________ _____________
Student Signature Parent/or Spouse Signature Date

The “2019 ADEA AADSAS FAP Cover Form along with the CAS ID# and email address.” must be submitted with all required supporting documents. If not submitted, the application for a fee waiver will be denied.

Note: If you purposely give false or misleading information on this document you will be disqualified from receiving funds and any previous funds awarded may be rescinded.
2019 ADEA AADSAS® FAP Cover Form

Applicant Name________________________ 2019 ADEA AADSAS CAS ID #___________________

Email Address__________________________

This form must accompany all required supporting documents being mailed to ADEA AADSAS FAP. If this form is not attached to all documents, the information will not be reviewed, and the request for a fee waiver will be denied. **If you are unable to provide any of the required documents below, you must write a “Letter of Explanation.”**

Below is a list of all required documents that must be submitted to ADEA AADSAS FAP to process the request. If the applicant is unable to provide any of the required documents below, a letter of explanation must be submitted.

☐ Applicant, parent/guardian and spouse (if married) 2017 1040 Tax Returns, W2s/1099s and schedule A (if itemizing deductions), If the applicant was born after January 1, 1993
☐ Applicant and Spouse (if married) 2017 1040 Tax Returns, W2s/1099s and schedule A (if itemizing deductions) If the applicant was born before January 1, 1993.
☐ Financial Aid Award Notification Letter. If Applicant is enrolled in a college/university for the 2017-2018 academic year and receiving financial aid. (Download from the Institutions’ website)
☐ 2019 ADEA AADSAS Income Verification Form (Completed)

**Tax Return Transcripts will not be accepted.**

Note: Applicants will only have one chance to submit all required supporting documents along with this form. Any documents submitted to ADEA AADSAS FAP without the 2019 ADEA AADSAS FAP Cover Form, CAS ID# and email address, will not be processed and the request for fee assistance will be denied. If you have any questions, please send all inquiries to FAPAADSAS@dea.org

Please mail the 2019 ADEA AADSAS FAP Cover Form with CAS ID# and all of the above required supporting documents to:

ADEA AADSAS Fee Assistance Program
655 K Street N.W.
Suite 800
Washington, D.C. 20001

2019 ADEA AADSAS FAP Use Only:

Documents Receipt Date: ____________________ Decision Date: ____________________

Approved_______________ Denied_______________

AMERICAN DENTAL EDUCATION ASSOCIATION