

2016 – 2017 Verification of Low Income

The income you reported on your 2016-2017 Free Application for Federal Student Aid (FAFSA) appears unusually low. Therefore, federal guidance recommends additional information be collected.

Please provide the following information regarding your monthly expenses and income for calendar year 2015.

DO NOT LEAVE SECTIONS BLANK; WRITE \$0.00 IF AN ITEM DOES NOT APPLY.

Blank information will NOT be accepted and will delay the Financial Aid process.

<u>Student/Spouse</u>	<u>2015 Monthly Income</u>	<u>Parent(s)/Others</u>
\$	Income from Working (Wages/Salaries/Tips)	\$
\$	Unemployment Benefits	\$
\$	Workers' Compensation	\$
\$	Social Security/Disability Benefits	\$
\$	Non-Educational Veteran's Benefits	\$
\$	Welfare Benefits including TANF	\$
\$	SNAP (Food Stamps)	\$
\$	Housing Assistance	\$
\$	Child Support Received	\$
\$	Alimony Received	\$
\$	Money from Parents/Family/Friends	\$
\$	TOTAL MONTHLY INCOME	\$

<u>Student/Spouse</u>	<u>2015 Monthly Expenses</u>	<u>Parent(s)/Others</u>
\$	Housing (Rent/Mortgage)	\$
\$	Groceries/Food	\$
\$	Utilities (Electric/Water/ Gas)	\$
\$	Personal Expenses (Clothing/Entertainment)	\$
\$	Cell/Telephone Bill	\$
\$	Cable/Satellite/Internet Bill	\$
\$	Transportation (Car Payment/Maintenance)	\$
\$	Insurance (Car, Life, Health, Home)	\$
\$	Child Care Expenses	\$
\$	Other (please indicate source: _____)	\$
\$	TOTAL MONTHLY EXPENSES	\$

You must provide an explanation below explaining how you and your parents were able to pay for your expenses in 2015. Do not use pencil. If additional space is needed, please provide a separate sheet of paper.

I certify that all information reported on this worksheet is complete and accurate to the best of my knowledge. WARNING: If you purposely give false or misleading information on this form, you may be subject to fines, other penalties and or incarceration.

Printed Student Name: _____ Date: _____

Student Signature: _____ Parent Signature: _____