



Low Income Form 2013-2014

Either you (if an independent student) or your parent (if a dependent student) reported income below the Poverty Guidelines as stated by the Department of Health and Human Services (HHS) for 2013 on the FAFSA, and did not report any untaxed income on the Verification Worksheet. According to the 2013 Poverty Guidelines for the 48 Contiguous States and the District of Columbia, a single individual must have income totaling \$11,490 to subsist at the poverty level.

Please review the chart below and consider what sources of income you may not have reported previously. Any cash support or money paid on either you or your parent's behalf is considered untaxed income and must be reported on the Other Income line. If you live with a friend or relative, this is considered in-kind support and the estimated value of the room and board must be reported on the Non-spouse Contributing Member line.

We cannot continue processing your financial aid until this form is returned.

2013 HHS Poverty Guidelines

Persons in Family Unit	48 Contiguous States and D.C.	Alaska	Hawaii
1	\$11,490	\$14,350	\$13,230
2	15,510	19,380	17,850
3	19,530	24,410	22,470
4	23,550	29,440	27,090
5	27,570	34,470	31,710
6	31,590	39,500	36,330
7	35,610	44,530	40,950
8	39,630	49,560	45,570
For each additional person, add	4,020	5,030	4,620

Income and In-kind Support

Enter zero or N/A if not applicable

\$ _____ Income from work for 2012
\$ _____ Financial Aid Awards for 2012
\$ _____ Yearly Unemployment in 2012
\$ _____ Child Support received in 2012
\$ _____ Pension or Retirement Payments
\$ _____ Veterans Non-education benefits
\$ _____ Welfare, DHHR and TANF benefits in 2012
\$ _____ SNAP Benefits for 2012
\$ _____ Subsidized housing received in 2012
\$ _____ Social Security Benefits received in 2012, including Disability

Yes or No Did you receive Medicaid or some form of Government Subsidized Healthcare

\$ _____ Other Income Source: _____

\$ _____ Non-spouse Contributing Member Relationship: _____
(include letter)

I understand that if I do not report any income or in-kind support on this form, the Financial Aid Office reserves the right to use the appropriate dollar amount from the Poverty Guidelines for my family size as untaxed income in my needs analysis.

Student Signature _____

Student ID _____

Student Name _____

Parent Signature _____

Date _____

Parent Name _____

Return completed form to:

Blue Ridge Community and Technical College

Office of Student Financial Aid

13650 Apple Harvest Drive

Martinsburg, WV 25403

304/260-4380 Fax 304/260-4376

www.blueridgectc.edu/financial_aid finaid@blueridgectc.edu