



2019-2020 Low Income Verification Form

Name: _____ Student Number: _____

The income you reported on your FAFSA application appears to be unusually low. Please fill out the income worksheet below. When completed, this worksheet should show how you were able to support yourself and/or your family for 2017. If not completed, this form will be returned to you causing further delays in your verification process.

Please list yearly total of all income received from January 1, 2017 – December 31, 2017 :

<i>Resources</i>	<i>Student</i>	<i>Parent(s)/Spouse</i>
<i>Earnings From Work</i>		
<i>Social Security Benefits</i>		
<i>Welfare (TANF), AFDC</i>		
<i>Food Stamps</i>		
<i>Child Support Received</i>		
<i>Money Received on Your Behalf (Explain Below)</i>		
<i>Benefits Received on Your Behalf (Explain Below)</i>		
<i>Other (Explain below)</i>		

Please provide details about your household financial resources. Explain how you covered housing, utilities, food, clothing, transportation, etc.

Be specific and list yearly amounts, not monthly.

_____ \$

_____ \$

_____ \$

_____ \$

_____ \$

I certify, under the penalty of perjury, that the information provided is true and correct to the best of my knowledge. I understand that the Financial Aid Office may request additional documentation to verify the above information.

Signed: _____ Date: _____

Student

Signed: _____ Date: _____

Parent (Dependent students are required signature of at least one parent)