

Low Income Verification 2009-10

NAME: _____

Student ID#: _____

Date of Birth: _____

Dear Parent(s):

We recently received a copy of your child's 2009-10 Free Application for Federal Student Aid (FAFSA), but the parent income reported appears to be unusually low. Before we can process your application for federal aid, we need you to provide us a complete list of the parent expenses and sources of income you received from January 1, 2008 through December 31, 2008.

Please provide your **annual** expenses from January 1, 2008 until December 31, 2008*

Please provide your **annual** amounts of income from January 1, 2008 until December 31, 2008:

Expense	Annual Amount Paid
Housing	\$ _____
Utility Bills	\$ _____
Medical Bills	\$ _____
Food	\$ _____
Transportation	\$ _____
Clothing	\$ _____
Child Care	\$ _____
Credit Cards	\$ _____
Other (Specify)	\$ _____

Income	Annual Amount Received
Employment	\$ _____
Cash Gifts	\$ _____
Social Security	\$ _____
Food Stamps	\$ _____
Welfare Benefits	\$ _____
Unemployment Comp.	\$ _____
Worker's Compensation	\$ _____
Other (Specify)	\$ _____
Financial Aid	\$ _____

Total** \$ _____

Total** \$ _____

*If you responded with all zeros on your expenses, please explain living arrangements:

**If your total expenses were greater than your total income for the year, please explain how you met these expenses (attach additional pages if needed):

Certification Statement:

"I declare all information on this form is true and correct and all sources of income have been reported to the best of my knowledge. Additionally, I understand I will be responsible for returning all student financial aid monies received due to inaccurate, false or misleading information provided on this form and/or any other documents submitted, including tax returns and W-2's."

Parent (or Step-Parent) Signature

Date