

STUDENT NAME: _____

SS#: _____

You reported an unusually low total amount of income for your family on your FAFSA. If the information on your FAFSA is inaccurate, speak to a financial aid representative about making the necessary corrections. If the information on your FAFSA is accurate, complete all parts of this Low Income Statement. Upon review by a financial aid counselor, additional documentation may be required. If you have questions about completing this form, you may speak with a financial aid representative. Please answer the following questions:

1. DID ANYONE IN THE HOUSEHOLD RECEIVE BENEFITS FROM ANY OF THE FOLLOWING FEDERAL BENEFIT PROGRAMS? (PLEASE CHECK)

Social Security Benefit
Monthly Amount: \$ _____
of Months Received in 2011: _____

Food Stamps/SNAP
Monthly Amount: \$ _____
of Months Received in 2011: _____

Public Assistance/TANF
Monthly Amount: \$ _____
of Months Received in 2011: _____

Section 8 (HPD/HUD)
Monthly Amount: \$ _____
of Months Received in 2011: _____

2. DID YOUR PARENT RECEIVE FUNDS FROM CHILD SUPPORT OR OTHER UNTAXED INCOME IN 2011?

- No
 Yes, Type of Untaxed Income _____ Amount Received \$ _____

3. DID YOUR PARENT(S) LIVE WITH A RELATIVE OR SOMEONE ELSE WHO PROVIDED FREE ROOM AND BOARD IN 2011?

- No
 Yes, Name _____ Relationship _____

4. DID YOUR PARENT(S) LIVE IN ANOTHER COUNTRY (NOT THE U.S.) IN 2011?

- No
 Yes, Name of Country _____ Arrival Date (MM/YY) to U.S. _____

5. DID YOUR PARENT(S) HAVE INCOME IN THEIR COUNTRY OF ORIGIN (NOT THE U.S.) IN 2011?

- No
 Yes, How much did your parents earn in 2011? (in U.S. Dollars) \$ _____

6. DID SOMEONE ELSE PAY YOUR PARENT(S)' RENT OR PERSONAL EXPENSES IN 2011?

- No
 Yes, Name _____ Relationship _____

Total \$ amount paid/received in 2011 _____

ADDITIONAL COMMENTS: _____

STUDENT/PARENT CERTIFICATION: *I/we declare that all information submitted on this form is true and complete.*

Student's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

STUDENT NAME: _____

SS#: _____

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STUDENT CERTIFICATION: I declare that all information submitted on this form is true and complete.

Student's Signature: _____ Date: _____