

## 2022-2023 Low Income Form

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Student's ID# \_\_\_\_\_

**SECTION I - The income/expenses listed below pertains to the following person:**

- Student**
                 
  **Spouse**
                 
  **Parent(s)**

Based on your 2022-2023 FAFSA (Free Application for Federal Student Aid), the 2020 income reported appears insufficient to support the number in the household. Please complete all information requested in **Section II** below to clarify the data you provided on the FAFSA. Sources should include any monetary support from parent(s) if you are an independent student, family, friends and other income received during 2020 even though it was not included on your income tax form.

**SECTION II - The information below must be completed (use 2020 annual amounts)**

| <u>Total INCOME for the year - 2020</u> | <u>Total EXPENSES for the year - 2020</u> |
|---|---|
| Earnings from work: _____               | Housing: _____                            |
| Gov't assistance/ Welfare: _____        | Utilities: _____                          |
| Unemployment: _____                     | Cell/Phone: _____                         |
| Child support: _____                    | Food: _____                               |
| Parental support: _____                 | Car payment/gas: _____                    |
| Friends/family assistance: _____        | Child support: _____                      |
| Food stamps: _____                      | Clothing/Misc: _____                      |
| Other: _____                            | Other: _____                              |
| <b>Total:</b> _____                     | <b>Total:</b> _____                       |

**Special circumstances:** If you have other means of paying for expenses, if your expenses are higher than your total income, or if your housing is \$0 and you listed "off campus" as the housing plans on your FAFSA, **please explain:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SECTION III: Certification Statement**

By signing this form, I/we certify that all the information on this form is complete and accurate.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse/Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_