

B.

Student Signature

Financial Aid

201 E. Greene Street | Milledgeville, Georgia 31061 (800) 342-0413 | (478) 387-4842 | (478)445-1257 Fax

Before federal student aid can be awarded, federal law requires confirmation of data for students

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be

selected for verification.

sentenced to jail, or both.

2014-2015 Independent Low Income Verification Form

A review of your financial aid application indicates that your total income from all sources in 2013 appears to be unusually low. Please provide **ALL** of the information requested on this form and return the document to the Financial Aid Office.

NAME	:	Student ID#	·	
•	Where was your primary residence in 2013? (i.e. with	parent, family membe	er, alone, with roommate)	
	 How were your living expenses paid for in 2013? (i.e. by you, parents, family member or other source) Did you receive low income housing benefits in 2013? (e.g. Section VIII, Subsidized Housing) 			
	Did you receive low income nousing benefits in 2013:	(e.g. section viii, sub	sidized flousing)	
List be	elow your and your spouse's total income from 2013 (do n	ot list monthly amoun	ts). List all sources of income.	
		<u>Student</u>	<u>Spouse</u>	
	Income earned from Work	\$	\$	
	Unemployment benefits	\$		
	TANF/Welfare/Food Stamps	\$		
	Child Support	\$	\$	
	Social Security	\$		
	Financial Aid	\$		
	Cash Received and/or money paid on your behalf	\$	\$	
	In-kind Support (value of non-monetary support: i.e. room/board)	\$	\$	
	Other Income (please specify)	\$	\$	
			•	
List be	elow the monthly expenses that <u>you and your spouse</u> paid	l in 2013:		
	Rent / Mortgage	\$		
	Utilities (Gas/Electricity/Water)			
	Food			
	Daycare	\$		
	Insurance	\$		
	Transportation	\$		
	Other (List)			

Date