

**Financial Aid** 

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

## 2013-2014 Dependent Low Income Verification Form

A review of your financial aid application indicates that your parent(s) total income from all sources in 2012 appears to be unusually low. Please provide <u>ALL</u> of the information requested on this form and return the document to the Financial Aid Office.

NAME: \_\_\_\_\_

SSN:

## 1. Did your parent(s) work during the 2012 tax year? □ yes □ no

## 2. Did your parent(s) receive any of the following:

Type of Income	Monthly Amount	Type of Income	Monthly Amount
1. Social Security Benefits		5.Alimony	
2. Unemployment		6. Pension/Retirement Benefits	
3. Welfare Cash Benefits		7. Combat Pay	
4. In-kind Support (free food, housing, basic necessities)		8. Military/Clergy Allowances	
5. Withdrawals from Savings		9. Veteran's Non- Educational Benefits	
6. Child Support		10. Cash received from family or friends	

- 3. Did you/your parent(s) have any financial obligations, in your name, paid on your behalf by someone else? (Exclude cash support received from parent(s)) □ yes □ no (examples include but are not limited to rent, cell phone, car payment, health insurance)
  - a. If YES, please give the amount for the year.

i. OYou\_\_\_\_ OParent(s)

Amount

## 4. Please list your parent(s) household expenses for 2012.

Amount

Expenses	Monthly Amount
Groceries	
Rent/House Payment	
Utilities (gas, electricity, phone)	
Transportation (car payment, insurance, gas)	
Medical/Dental	
Child Care	
Other personal expenses (clothing)	
Total	

Please provide any additional information that reflects how your parent(s) met their day-to-day living expenses (e.g. student loans, WIC, disability, etc.).

ALL THE INFORMATION ON THIS FORM IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. WE UNDERSTAND THAT THE INFORMATION ON THIS FORM WILL BE USED TO VERIFY THE FINANCIAL AID INFORMATION PROVIDED AND MAY REQUIRE FURTHER FOLLOW UP FROM THE OFFICE OF FINANCIAL AID.

STUDENT SIGNATURE

DATE

Date

PARENT SIGNATURE

The GMC Financial Aid Office will use your student email address to contact you on most occasions. You are responsible for checking your GMC student email frequently.