



## Low Income Verification Form 2020-2021

Student's Name \_\_\_\_\_ Student ID: \_\_\_\_\_  
Last First M.I.

The 2018 income you reported on your FAFSA application is unusually low or zero. Clarification as to how you lived on this income is needed. Your application for financial aid is on hold until you complete and return this form to us. If you are a dependent student, you must include parental information. Use the back of the form if necessary. If you have any questions, please contact us at 252-862-1200.

**Instructions:**

1. Provide information regarding income from January 1, 2018 to December 31, 2018.
2. Show how you/parents were able to support yourself/themselves for 2018.
3. List the **YEARLY** amount received during 2018 for each item.
4. Questions left blank will cause the form to be returned to you for completion.

	Student	Spouse (if married)	Mother or Stepmother (if dependent student)	Father or Stepfather (if dependent student)
Wages, Salaries. (money from a job)	/year	/year	/year	/year
Unemployment Compensation	/year	/year	/year	/year
Workers' Compensation	/year	/year	/year	/year
Social Security Benefits	/year	/year	/year	/year
Child Support	/year	/year	/year	/year
Alimony	/year	/year	/year	/year
Veteran's Benefits	/year	/year	/year	/year
Welfare/TANF (Gov't cash assistance)	/year	/year	/year	/year
Pension Payments	/year	/year	/year	/year
Food Stamps	/year	/year	/year	/year
Housing Assistance	/year	/year	/year	/year
Any cash from family members, cash gifts, or money for bills.	/year	/year	/year	/year

1. Do you/parents have any bills' in your name?  
 A. If "yes", please lists all bills and amounts that were incurred during 2018.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 B. Who pays for these bills? \_\_\_\_\_

2. If you answered "No", please explain who or how you were able to cover day-to-day living expenses, rent, or house payment, utility bills, food, clothing and other necessities during 2018.  
 \_\_\_\_\_  
 \_\_\_\_\_

I/ We certify that all information reported is complete and correct to the best of my ability, and that I have attached relevant documentation, if applicable. I/We understand that any false statement or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of financial aid and may subject the financial aid recipient to a fine, imprisonment, or both under provision of the U.S. Criminal Code.

Student's Signature: \_\_\_\_\_ Parent's Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_