



Seward County Community College ♦ Financial Aid Office

2018-2019 Verification – Dependent Low Income Verification

The results of your Free Application for Federal Student Aid (FAFSA) indicate that you reported extremely low income to be sufficient to support you and your dependents for the 2018-2019 calendar year.

In order to continue processing your financial aid application for the 2018-2019 award year, you must provide the following information **on your parent(s) income and living expenses for 2018**. **DO NOT LEAVE ANY ITEMS BLANK – items left blank will cause a delay in processing your financial aid.**

Parent Name _____

Social Security Number _____

Student Name _____

Social Security Number _____

Please list your budget expenses for 2018 and then list the financial sources to support those expenses.

2018 Monthly Expenses:

2018 Monthly Income:

Rent/Mortgage	\$ _____	Wages, Salaries, Tips, etc.	\$ _____
Utilities	\$ _____	Unemployment	\$ _____
Food (exclude Food Stamps)	\$ _____	Workman’s Comp	\$ _____
Automobile Payment	\$ _____	Social Security Benefits	\$ _____
Gas, oil, maintenance	\$ _____	Child Support	\$ _____
Child or Day Care	\$ _____	Welfare, AFDC, Food Stamps	\$ _____
Clothing & Personal	\$ _____	Veteran’s Benefits	\$ _____
Insurance (medical, auto, home)	\$ _____	Support from Parent/Spouse	\$ _____
Credit Card Payments	\$ _____	Student Financial Aid	\$ _____
Miscellaneous Expenses	\$ _____	Other Support	\$ _____
Total Monthly Expenses	\$ _____	Total Monthly Income	\$ _____
	x 12 months =		x 12 months =
<u>Total 2018 Expenses</u>	\$ _____	<u>Total 2018 Income</u>	\$ _____

Please provide copies of 3 recent paystubs/sources of income AND copies of 3 different expenses paid (rent receipts, utility/phone bill, car payments, etc.) indicating your earnings and expenses for 2018.

You must fill out the back

SUPPORT CERTIFICATION

Complete this section if the total of your Parent’s income reported on this form is less than \$5,000 per person. Please explain how you and your parent’s met your monthly expenses and you will need to explain in detail your living situation. {e.g., low income housing, social security benefits, Supplemental Security Income, SNAP (food stamps), TANF(Temporary Assistance to Needy Families), Unemployment benefits, Workers’ Compensation benefits, money received or paid on your behalf such as (if someone is paying your rent, utilities, bills, etc. or gives you cash, gift cards, etc.)}, and other untaxed income.

WARNING: If you receive student aid based on incorrect information, you may have to return it and/or pay fines and fees. If you purposely give false or misleading information on this form, you may be fined \$20,000, receive a prison sentence, or both.

AFFIRMATION: By signing below, I certify that all information I have submitted is accurate.

Student Signature

Date

Parent Signature

Date