

2021-2022 Low Income Statement Estimated Family Budget Report (12 Month) – Dependent

The information you provided on your FAFSA reflects a particularly low income for 2019; therefore, we must ask you to verify how your entire family will meet living expenses in 2021-2022. Please complete the following chart.

Student Name _____ Date of Birth _____

Address _____ Phone # _____

City, State, Zip _____

| | | |
|--|---------|-----------------------|
| In 2019, did you or your parents receive: | | |
| Social Security Benefits? | Yes/No | 2019 yearly total: \$ |
| Supplemental Security Income? | Yes/No | 2019 yearly total: \$ |
| Non-education veteran benefits? | Yes/No | 2019 yearly total: \$ |
| Child support? | Yes/No | 2019 yearly total: \$ |
| Income earned from work? | Yes/No | 2019 yearly total: \$ |
| Other resources not listed? Source: | Yes/No | 2019 yearly total: \$ |
| SNAP (food stamps) benefits? | Yes/No | |
| Medical or dental assistance from the state? | Yes/No | |
| Basic needs (housing, food, clothing) from anyone? | Yes*/No | |
| *If yes, please indicate the name and relationship to your family: | | |

Parents: Please explain in further detail how you were able to support the household for the 2019.

Has this situation changed for the 2021-2022 school year? If so, please explain.

By signing below, I certify that all the information I have submitted is accurate and can be verified with supporting documentation.

Student's Signature _____ Date _____

Parent's Signature _____ Date _____

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.