

2022-2023 Low Income Statement Estimated Family Budget Report (12 Month) – Independent

The information you provided on your FAFSA reflects a particularly low income for 2020; therefore, we must ask you to verify how your entire family will meet living expenses in 2022-2023. Please complete the following chart.

Student Name _____ Date of Birth _____

Address _____ Phone # _____

City, State, Zip _____

In 2020, did you receive:		
Social Security Benefits?	Yes/No	2020 yearly total: \$
Supplemental Security Income?	Yes/No	2020 yearly total: \$
Non-education veteran benefits?	Yes/No	2020 yearly total: \$
Child support?	Yes/No	2020 yearly total: \$
Income earned from work?	Yes/No	2020 yearly total: \$
Other resources not listed? Source:	Yes/No	2020 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 you:		

Please explain in further detail how you were able to support the household for the 2020.

Has this situation changed for the 2022-2023 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 _____

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.