

According to your FAFSA, the federal government has indicated that your total income is at or below the federal income poverty guidelines (see reverse side). In order to verify the reported information and complete your financial aid application, you and your spouse (if applicable) must complete the following information concerning the income received and the expenses incurred during the current calendar year 2018. To avoid unnecessary financial aid processing delays, read each section thoroughly and follow directions exactly when providing answers.

Student's Name: _____

NSSC ID Number: N _____

Current Household Expenses	List Monthly Amount	How was this expense paid?
Rent or mortgage payment*	\$	
Car payment/ Transportation	\$	
Groceries	\$	
Health care (medical, vision, dental premiums or out-of-pocket)	\$	
Child care	\$	
Utilities (water, gas, and electric)	\$	
Phone (cell phone and/or home phone)	\$	
Television/ Internet	\$	
Miscellaneous personal expenses (hygiene, clothing, etc.)	\$	
Child support paid	\$	
Other (specify)	\$	
Total living expenses for the entire year 2018	\$	

*If you reported \$0 for rent/mortgage payment, please explain: _____

Your household may have additional resources other than earnings from employment. List below amounts for all forms of additional resources received by you and your spouse in 2018.

Current Household Income/Resources	Student List Monthly Amount	Spouse List Monthly Amount	Please add any clarifying comments if needed
Income from work (gross amount)	\$	\$	
Resources from parents/relatives/significant other	\$	\$	
Unemployment benefits/ TRA living assistance	\$	\$	
Disability benefits	\$	\$	
Child support received	\$	\$	
Business, rental, or farm income	\$	\$	
Alimony	\$	\$	
Supplemental Nutrition Assistance Program (SNAP)	\$	\$	
Social Security retirement benefits	\$	\$	
Social Security disability benefits (SSI)	\$	\$	
Subsidized/ Public Housing (HUD) benefits	\$	\$	
Public assistance (including TANF)	\$	\$	
Veteran's benefits (non-education)	\$	\$	
Financial Aid Refund	\$	\$	
Other (specify)	\$	\$	
Total income/resources for the entire year 2018	\$	\$	

Certification and Signatures

By signing this worksheet, I certify that all the information reported on this worksheet is complete and correct. A delay in processing will result if this form is not signed or if there is conflicting information on this worksheet. **WARNING:** IF you purposely give false or misleading information on this form, you may be subject to fines and/or other penalties.

Student Signature: _____	Date _____
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2016 Federal Income Guidelines

Family Size	Federal Guidelines
1	11,880
2	16,020
3	20,160
4	24,300
5	28,440
6	32,580
7	36,730
8	40,890

Add \$4,160 for each additional person if the family unit has more than eight members.

* Based on 2016 guidelines from the Federal Register: <https://www.federalregister.gov/>