



Low Income Statement 2019-2020 STUDENT

Student Name: _____ SSN: _____ SID: _____

You reported very little income on your 2019-2020 FAFSA. Please give us a brief summary of how you met your living expenses in 2017.

EXPENSES for 2017			RESOURCES for 2017		
Expenses	Cost per Mo.	Number Mos.	Resources	Amt. Per Mo.	Number Mos.
Rent	\$		Wages	\$	
Food	\$		Gifts from parents, relatives or friends	\$	
Utilities	\$		Interest/Dividend	\$	
Clothing	\$		Welfare/TANF/Food Stamps	\$	
Medical/Dental	\$		Social Security	\$	
Car Payments	\$		VA Benefits	\$	
Gas, oil, Maintenance	\$		Disability	\$	
Bus Fare	\$		Unemployment	\$	
Other Expenses	\$		Other	\$	
TOTAL EXPENSES	\$		TOTAL RESOURCES		

If you show NO income, how did you meet your living expenses?

What were your resources for 2018?

Student Signature Date

If someone else paid your expenses, you may be required to obtain a signed statement from the person who provided your support.