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Student ID number

2019-2020 Minimal Income Statement for Married Independent Students

To accurately evaluate your eligibility for financial aid, our office requires that you provide supplemental documentation of your income and assets reported on your FAFSA. Please complete this form, explaining how you and your spouse were able to cover expenses such as housing, food and utilities during the **2017 calendar year**.

Name _____
Last
First
Middle

Address _____
Street Address
Apt. #
City
State
Zip Code

Date of Birth _____ Email Address _____

Primary Phone Number _____ Alternate Phone Number _____

SECTION A: INCOME

The form will be returned if you leave a field blank. If the answer is zero enter "0" or "N/A."

Student 2017 Income	Amount Per Month	Spouse 2017 Income	Amount Per Month
Income from work (gross amount)		Income from work (gross amount)	
Business income		Business income	
Social Security Benefits		Social Security Benefits	
Unemployment compensation		Unemployment compensation	
Child Support		Child Support	
Worker's compensation		Worker's compensation	
Disability Benefits		Disability Benefits	
Alimony		Alimony	
SNAP/Food Stamps		SNAP/Food Stamps	
TANF		TANF	
Rental assistance		Rental assistance	
Cash assistance from family and friends		Cash assistance from family and friends	
Cash received or money paid on your behalf		Cash received or money paid on your behalf	
Other sources		Other sources	
TOTAL INCOME =		TOTAL INCOME =	

