



## 2018-2019 Affidavit of Income and Expenses

The 2016 income you reported on your financial aid application (FAFSA) appears to be unusually low. Please fill out the income and expenses worksheet below. When completed, this worksheet should show how you were able to support yourself and/or your family for 2016. If you are a dependent student, you must include parental information on the back page. **In all cases, the total yearly income must equal or exceed the total of all expenses recorded.**

Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

| Expenses                                      | Student & Spouse | Income   | Student & Spouse |
|---|------------------|--|------------------|
| Housing                                       | \$ /yr           | Earnings from all jobs   | \$ /yr           |
| Food  | \$ /yr           | Unemployment Compensation                                      | \$ /yr           |
| Car payment/Insurance                         | \$ /yr           | Withdrawals from savings                                       | \$ /yr           |
| Car maintenance/Gas                           | \$ /yr           | Social Security/Disability Benefits                            | \$ /yr           |
| Utilities/Telephone/Cable                     | \$ /yr           | Welfare, AFDC, TANF  | \$ /yr           |
| Credit Card Payments                          | \$ /yr           | Child Support Received   | \$ /yr           |
| Child Support/Alimony Paid<br>List child(ren) | \$ /yr           | Alimony/Palimony Received                                      | \$ /yr           |
| Clothing                                      | \$ /yr           | Bills paid by someone else on your behalf (total dollar value) | \$ /yr           |
| Entertainment                                 | \$ /yr           | Cash received from family and/or friends                       | \$ /yr           |
| Child Care                                    | \$ /yr           | Total Financial Aid received in 2016                           | \$ /yr           |
| Other:  | \$ /yr           | *Support provided by others. Please explain below.             | \$ /yr           |
| Other:  | \$ /yr           | Tribal Benefits received in 2016 (total dollar value)          | \$ /yr           |
| Other:  | \$ /yr           | *Other: Explain Below  | \$ /yr           |
| <b>Total 2016 Expenses</b>                    | <b>\$ /yr</b>    | <b>Total 2016 Income</b>                                       | <b>\$ /yr</b>    |

Living Arrangements for 2016 (living with parents, single, married, living with relatives, incarcerated, etc.) \_\_\_\_\_

In 2016 were some of your expenses offset by the following: *(Check all that apply)*

- Food Stamps   
  Free/Reduced Price School Lunch   
  WIC   
  Section 8 or other housing subsidies   
  Energy Assistance

\*Examples of support include food, shelter, clothing, non-cash gifts etc. Be sure to list the total dollar value of support received in 2016.

\_\_\_\_\_  
\_\_\_\_\_

By signing this worksheet, I/we certify that all the information reported to qualify for Federal student aid is complete and correct. If the student is married, the spouse must sign. If the student is a dependent student, a parent must complete the reverse side and sign.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.**

**PARENTS 2016 EXPENSES AND INCOME**  
(complete only if student is dependent)

| <b>Expenses</b>                               | <b>Parent(s)</b> | <b>Income</b>   | <b>Parent(s)</b> |
|---|------------------|---|------------------|
| Housing                                       | \$ /yr           | Earnings from all jobs  | \$ /yr           |
| Food  | \$ /yr           | Unemployment Compensation   | \$ /yr           |
| Car payment/Insurance                         | \$ /yr           | Withdrawals from savings  | \$ /yr           |
| Car maintenance/Gas                           | \$ /yr           | Social Security/Disability Benefits                               | \$ /yr           |
| Utilities/Telephone/Cable                     | \$ /yr           | Welfare, AFDC, TANF   | \$ /yr           |
| Credit Card Payments                          | \$ /yr           | Child Support Received  | \$ /yr           |
| Child Support/Alimony Paid<br>List child(ren) | \$ /yr           | Alimony/Palimony Received   | \$ /yr           |
| Clothing                                      | \$ /yr           | Bills paid by someone else on your<br>behalf (total dollar value) | \$ /yr           |
| Entertainment                                 | \$ /yr           | Cash received from family and/or<br>friends                       | \$ /yr           |
| Child Care                                    | \$ /yr           | Total Financial Aid received in<br>2016                           | \$ /yr           |
| Other:  | \$ /yr           | *Support provided by others.<br>Please explain below.             | \$ /yr           |
| Other:  | \$ /yr           | Tribal Benefits received in 2016<br>(total dollar value)          | \$ /yr           |
| Other:  | \$ /yr           | *Other: Explain Below   | \$ /yr           |
| <b>Total 2016 Expenses</b>                    | <b>\$ /yr</b>    | <b>Total 2016 Income</b>  | <b>\$ /yr</b>    |

Living Arrangements for 2016 (single, married, living with relatives, incarcerated, etc.) \_\_\_\_\_

In 2016 were some of your expenses offset by the following: *(Check all that apply)*

Food Stamps     Free/Reduced Price School Lunch     WIC     Section 8 or other housing subsidies     Energy Assistance

\*Examples of support include food, shelter, clothing, non-cash gifts etc. Be sure to list the total dollar value of support received in 2016.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

By signing this worksheet, we certify that all the information reported to qualify for Federal student aid is complete and correct. If the student is a dependent student, a parent must sign.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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