

INCOME VERIFICATION WORKSHEET

INCWKS

STUDENT ID: _____		YEAR/TERM: _____	
LAST NAME _____	FIRST _____	MI _____	
Size of Household: _____	<input type="checkbox"/> DEPENDENT	<input type="checkbox"/> INDEPENDENT	Phone: _____ - _____ - _____

The 2014 income you reported on your 2015-16 Free Application for Federal Student Aid (FAFSA) looks inadequate to maintain the number of people you reported in your household. Please fill out this worksheet clarifying how you were capable of affording housing, food, utilities, clothing, etc. for your family in 2014. **Please be advised this worksheet will be given back to you if it is incomplete.**

1. ***INCOME- Fill in and itemize the boxes below from January 1, 2014 through December 31, 2014.***

Please provide any assistance or revenue from others who supported you. Add an extra sheet if needed. Add in all monies in cash you were given or any other monetary support you received. If you lived in housing funded by anyone other than yourself, such as subsidy, state, or federal assistance with utilities, please include that in your reporting as well.

Note: If something does not apply, enter a "0". DO NOT LEAVE ANY BLANK SPACES.

STUDENT	INCOME SOURCES AND AMOUNTS IN 2014 (ANNUAL AMOUNTS ONLY)	PARENT/SPOUSE
\$	Earnings from work	\$
\$	Unemployment compensation	\$
\$	Child support received	\$
\$	Alimony received	\$
\$	Money received or paid on your behalf (for your bills or cash given to you for expenses)	\$
\$	Cash gifts	\$
\$	Public assistance: food stamps (SNAP)	\$
\$	Public assistance: housing (TANF), utilities, etc.	\$
\$	Social Security	\$
\$	Money from savings	\$
\$	Loans/financial aid received	\$
\$	Veterans non-education benefits	\$
\$	Other untaxed income: please specify here:	\$

2. Please thoroughly define your monetary and living conditions; describe how you and/or your family survive with the budget stated above. Include an additional sheet to explain if required. **DO NOT LEAVE BLANK.**

Student's Signature: _____ Date: _____

Parent's Name: _____ Signature: _____

Date: _____

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