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2021-2022 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 **2019 calendar year**.

Name					
	Last	I	First		Middle
Address					
	Street Address	Apt. #	City	State	Zip Code
Date of Birt	h	Email Address			
Primary Ph	one Number	A	lternate Phone N	amber	
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SECTION A: INCOME

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

Student 2019 Income	Amount Per Month	Spouse 2019 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 =	

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2019 Spouse Expenses

First Middle

Date

Amount

Per Month

SECTION B: EXPENSES

Spouse Signature

2019 Student Expenses

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

Amount

Per Month

Rent/Mortgage	Rent/Mortgage
Utilities (electric, water, gas)	Utilities (electric, water, gas)
Telephone/Cell Phone	Telephone/Cell Phone
Medical/Dental health insurance	Medical/Dental health insurance
Car payment	Car payment
Car insurance	Car insurance
Food/Groceries	Food/Groceries
Transportation (fuel, bus, train)	Transportation (fuel, bus, train)
Child Support	Child Support
Other expenses	Other expenses
TOTAL EXPENSES =	TOTAL EXPENSES =
	An explanation is also required if few or no expenses were listed in c. to meet your expenses, attached three consecutive monthly statements if necessary.
Please explain your situation. Include as much other living expenses for calendar year 2019 Section B. If you used savings, line of credit, et	c. to meet your expenses, attached three consecutive monthly statements
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