

# Tabor College 2022-2023

## Low/No Income Verification Worksheet



Student Last Name

Student First

Student Middle

Student ID Number/or Social Security Number

The 2020 income reported on your 2022-2023 FAFSA appears to be too low to support the number of people in the household. Our institutional policy in conjunction with the Federal Policy of conflicting information allows us to ask for supporting documentation. Complete this form to provide information that explains how you and your spouse **OR** your parent(s) (for dependent students) were able to live and support the family in 2020. **PLEASE DO NOT LEAVE BLANKS:** If an item does not apply to you, enter "0" or "N/A". While it may be difficult to determine some figures, it is important to provide the most accurate information possible. Financial aid administrators have the authority to request any documentation they need in order to resolve discrepancies, per section 479A of the Higher Education Act of 1965 and the regulations at 34 CFR 668.51(b), 34 CFR 668.54(a)(3), 34 CFR 668.54 (a)(5), 34 CFR 660.60(a), 34 CFR 668.60(b)(1), 34 CFR 668.60(c)(2) and 34 CFR 668.60(d).

### SECTION 1:

Did anyone in the household receive income from working or from other sources in 2020 (Submit supporting documentation, if applicable)

Source of Income	Amount Received During 2020	Name of person who received this income.	Relationship to Student (self, parent, etc.)
a. Earnings from work (submit copies of all W-2's)			
b. Unemployment Compensation (submit 1099-G)			
c. Child Support			
d. Alimony			
e. Financial Aid (in excess of school expenses)			
f. Other:			

### SECTION 2:

Did anyone in the household receive income from working or from other sources in 2020 (Submit supporting documentation, if applicable)

Type of Benefit	Amount Received During 2020	Name of person who received this income.	Relationship to Student (self, parent, etc.)
a. SSI of Social Security			
b. AFDC/TANF			
c. Food Stamps/SNAP			
d. WIC			
e. Free/Reduced Price Lunch			
f. Subsidized Housing			
g. (HUD, Section 8, etc.)			

**SECTION 3:**

Were you (or your spouse or your parents) incarcerated during 2020?

\_\_\_\_\_ NO \_\_\_\_\_ Yes- From \_\_\_\_\_ to \_\_\_\_\_

**SECTION 4:**

If you (and your spouse **OR** parents) **were not employed and did not receive any untaxed income** during 2020, but lived with individuals who provided support, you must indicate a dollar value to assess that support. **To do this, you will need to discuss the monthly expenses with the head of the household. PLEASE DO NOT LEAVE BLANKS:** in an item does not apply to you, enter "N/A".

Type of expense	Monthly amount	Name of person who pays this expense.	Relationship to Student (self, parent, etc.)
a. Housing (rent/mortgage)			
b. Utilities (electric, gas, water)			
c. Food			
d. Phone, internet, cable			
e. Medical, Dental			
f. Child Care			
g. Auto (Car payment, insurance, maintenance, etc.)			
h. Transportation (gas, bus ticket, etc.)			
i. Personal (clothes, credit cards, personal hygiene items, etc.)			
j. Other:			
<b>TOTAL MONTHLY EXPENSES</b>			

How many months did you reside in the household during 2020? \_\_\_\_\_  
Is your name on the mortgage/lease agreement? Yes \_\_\_\_\_ No \_\_\_\_\_

How many adults (over the age of 18) lived in the household in 2020? \_\_\_\_\_

**CERTIFICATION: Read carefully before signing**

I hereby certify that all information contained in this document, including supporting documentation is true and complete to the best of my knowledge. I understand that if I am found to have knowingly or intentionally given false or fraudulent statements and/or documentation, my eligibility for federal and state aid may be further verified and corrected as required.

Tabor College reports all suspected cases of fraud in any attempt for the sole purpose of qualifying and/or collecting financial aid to the U.S. Department of Education for possible investigation by the Office of Inspector General and possible prosecution by an appointed United States Attorney for sentencing of fines, imprisonment, or both.

**SECTION 5: SIGNATURES**

By signing this worksheet, I (we) certify that all the information reported to qualify for federal student aid is complete and correct. At least one parent must sign if you are a dependent student. *(We cannot accept digital signatures)*

\_\_\_\_\_  
Student Date Parent (or Spouse) Date

*You should make a copy of this worksheet for your records. Do not mail this worksheet to the Department of Education.*

Tabor College  
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