

## **2022-2023** Household Income and Expense Verification Form

Please complete this form in its entirety as it will provide information incurred during the 2020 calendar year.	n regarding you a	and your family's income	received and ex	xpenses that
Student Name:	Student ID:			
Please identify which applies to you:  I am a DEPENDENT student (had to provide parental		ŕ		
I am an INDEPENDENT student (did not have to prov	ide parental inf	formation on FAFSA).		
Please list all sources of untaxed income, resources, and benef you must include sources from both <b>you</b> and <b>your parent(s)</b> . It include sources from <b>yourself</b> and <b>spouse</b> (if applicable).				
Untaxed Income, Resources, and Benefits for 2020	Student/Spouse List Annual Amount (indicate \$0 if not applicable)		Parent(s) List Annual Amount (indicate \$0 if not applicable)	
Untaxed Wages, Salaries, and Tips (non-taxable)	\$		\$	
Cash Support Received (e.g. cash, gift, housing, food)	\$		\$	
Unemployment Benefits (non-taxable)	\$		\$	
Disability Benefits	\$		\$	
Child Support/Alimony Payments Received	\$		\$	
Social Security Benefits (non-taxable)	\$		\$	
SNAP (Supplemental Nutrition Assistance Program)	\$		\$	
TANF (Temporary Assistance for Needy Families)	\$		\$	
Veterans Benefits (non-taxable, non-educational)	\$		\$	
Financial Aid Payments/Refunds	\$		\$	
Other Income (explain):	\$		\$	
Please list all annual expenses paid in 2020.				
Household Expenses for 2020		List Annual Amour \$0 if not applic		
Rent or Mortgage Payment		\$		
Utilities (e.g. water, gas, electric)		\$		
Phone (cellphone and/or home phone)		-		
Automobile Expenses (e.g. payments, gas, insurance, maintenance)		\$		
Health Care (e.g. medical, dental, vision)		\$		
Child Care (e.g. daycare, babysitter, tuition)		\$		
Personal Expenses (e.g. toiletries, clothing)		\$		
Student Loan Payments		\$		
Other Expenses (explain):		\$		
Certification and Signatures				
By signing below, I/we acknowledge and confirm that the info	ormation provid	led on the 2022-2023 F	Household Inc	ome and Expense
Verification Form is complete and accurate. Purposely giving				
sentence, or both. If the student is dependent, the parent whose				
If you identified yourself as a <b>DEPENDENT</b> , this form must <b>INDEPENDENT</b> , only your signature is required. <b>Electronic</b>			f you identifie	ed yourself as an

Student Signature: