



Financial Support Worksheet 2009-2010

The information on your FAFSA suggests that your (or your family's) combined income was unusually low for the number of people in your family. You have reported a combined family income that is less than 50% of the 2008 Poverty Guidelines published by the U.S. Department of Health and Human Services (http://aspe.hhs.gov/poverty/08poverty.shtml).

Please clarify your family income AND any non-monetary support you received from any source in 2008 using the worksheet below.

LAST NAME FIRST NAME M.I. STUDENT ID -OR- SOCIAL SECURITY NUMBER

PHONE NUMBER (INCLUDING AREA CODE) DATE OF BIRTH

FINANCIAL SUPPORT

- 1. Did you/your family live with a relative, friend, or other person rent-free in 2008?
2. Did a relative, friend, or other person provide food/groceries to you/your family free-of-charge in 2008?

IF YOU ANSWERED NO TO ANY OF THE ABOVE QUESTIONS, YOU MUST COMPLETE QUESTION FIVE

- 3. Did you/your family receive ANY form of state, local, or federal assistance in 2008?
I.E. Food Stamps, WIC, SSI, child support, housing, medical, or daycare assistance. Please list.

Table with 3 columns: Assistance Provider, Program, 2008 Total

- 4. Please list ALL income earned from working or cash gifts you received in 2008.
If you did not work at all in 2008, write "0" in the "2008 Total" Column.

Table with 3 columns: Family Member, Source of Income/Gift or Employer, 2008 Total

- 5. If you did not work in 2008, you must provide an explanation of how you lived and/or supported your children. Please complete the following budget breakdown of your living expenses by indicating the amount of each monthly expense and who paid it or how it was paid on your behalf.

Table with 3 columns: Monthly Expense, Paid by, 2008 Total

SIGN THIS WORKSHEET

By signing this form I certify that all the information reported on this document is true and correct to the best of my knowledge. I understand that if I purposely give false or misleading information I may be subject to a fine, imprisonment, or both. I also authorize the College of Southern Idaho to make any necessary electronic corrections to my FAFSA based on the information submitted.

STUDENT SIGNATURE DATE