



Financial Aid Office
2019/2020 Independent Student Statement of Support

Student ID #: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I and/or my spouse did not file a 2017 Tax Return.

Check box for any benefits received in 2017:

SNAP HUD SSI/SSD WIC TANF Medicaid/Medicare Child Support Reduced price school lunch

How were you and/or your household supported during the 2017 year? For example: Lived with parent/other, HUD, Food Stamps, WIC, SSI, etc. If you received any of the above please tell us how much each month.

Blank lines for providing household support details.

Did someone help support you in 2017? If yes, whom? How much money each month do they contribute towards living expenses? For example: cell phone, car insurance, car payment, etc.

Blank lines for providing support details.

Student did not work in 2017, but started working on \_\_\_\_\_ @ \_\_\_\_\_ earning \$ \_\_\_\_\_

\*May request additional documentation

By signing below, I certify that all of the information on this form is true and complete.

Student \_\_\_\_\_ Date \_\_\_\_\_