



Dependent

LOW INCOME CERTIFICATION
(INCOME LESS THAN \$6,000)

Student Name: _____

Parent Name(s) (Print): _____ / _____

I certify that my/our total income for the year:

2015: \$_____, which was accurately reported on my 2016-2017 FAFSA.

Please describe how you and your family survived on such low income:

We are currently receiving income of \$_____ per month.

Please explain how you are supporting yourself now if current income is \$0.00

Third Party Certification

I certify the accuracy of the above statement.

Print Name

Contact Number Area Code/Telephone

Signature

Relationship

Date

The parent verification of income and household size is complete based on the information provided.

Student Signature: _____

Date: _____

Parent Signature: _____

Date: _____

FAO Signature: _____

Date: _____