



Student ID Number: _____

Federal Student Aid Program **INDEPENDENT**

2016 - 2017 Other Untaxed Income

STUDENT INFORMATION

Last Name	First Name	M.I.	Social Security Number
Address (include apt. no.)			Date of Birth
City	State	Zip Code	Phone Number (include area code)

FAMILY INFORMATION - Follow these instructions *carefully*

The income reported on the 2016-2017 Free Application for Federal Student Aid appears unusually low. Therefore, additional information is needed before processing of your financial aid application can continue. Please itemize your and/or your spouse's resources received from January 1, 2015, through December 31, 2015. **Note:** No further action will be taken on your application until this information is received.

2015 INCOME AND OTHER RESOURCES: Report amounts for all the different types that apply to your family's situation. Please list the **total** 2015 amount for the year (**not monthly amounts**).

		Student	Spouse
1.	Wages - Income earned from working		
2.	Business income - Income earned from your business		
3.	Interest/Dividends - Income received from bank accounts/stocks		
4.	Living Assistance Housing, food, utilities and other living assistance/allowances from churches, BAQ, HUD or others, except from parents, family & friends (include cash or the cash value)		
5.	Supplemental Nutrition Assistance Program (SNAP) - SNAP benefits received for year		
6.	Temporary Assistance for Needy Families (TANF) - Total funds received for the year		
7.	Social Security Benefits - Report total 2015 funds received for each family member (Including SSI): Family members would include but is not limited to the student, spouse, children, legal dependents		
8.	Worker's Compensation - Report total funds received		
10.	Unemployment/Severance - Report total funds received		
11.	Child Support Received - Report amount received for the year		
12.	Disability - Report any funds received		
13.	Parents, Family and Friends - Housing, food, utilities and other contributions received from parents, family and friends (include cash and cash value)		
14.	Other _____ - Report any other funds or support received from any (Name source) source not previously reported on this form		
15.	Total 2015 Income and other Resources (Add columns 1 through 14)		

Student's Name: _____

Student ID Number: _____

Please provide a written explanation that describes how you (and your spouse) were able to pay for your (or your family's) living expenses in 2015 (If you need additional space, please attach additional page.):

SIGN THIS WORKSHEET By signing this worksheet, I (we) certify that all the information reported on is complete and correct

Student's signature required: _____ Date: _____

Spouse's signature (optional): _____ Date: _____

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail or both.

Submit this worksheet to the Financial Aid Office.

Note: All documents and forms submitted become the property of Galveston College and cannot be returned.
Please make copies for your records before submitting the required information to the Financial Aid Office.