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| STUDENT LAST NAME: | STUDENT FIRST NAME: | AU ID#: |
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Dependent Student: Parent's Household Income and Expenses for 2016

On your Free Application for Federal Student Aid (FAFSA), the federal government has indicated that the total income your parents reported does not appear sufficient to meet basic living expenses. In order to verify the reported information and complete your financial aid application, you and your parent(s) must complete the following information concerning the income your parent(s) received, and the expenses your family incurred, during **calendar year 2016**. Please complete all required sections of this form, including yours and your parent's signature and date, and return it to our office. **Failure to do so will result in a suspension of your request for financial assistance for the 2018-2019 academic year.**

2016 Yearly Expenses

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|--------------------------------|-----------|
| Housing/Rent/Mortgage: | \$ |
| Utilities (ie: gas, electric): | \$ |
| Cell Phone/Cable: | \$ |
| Food/Groceries: | \$ |
| Car Loans/Insurance: | \$ |
| Gas/Auto Maintenance: | \$ |
| Public Transportation: | \$ |
| Medical/Dental: | \$ |
| Medical/Health Insurance: | \$ |
| Clothing: | \$ |
| Laundry/Dry Cleaning: | \$ |
| Child Care: | \$ |
| Entertainment: | \$ |
| Other (specify): _____ | \$ |
| *Total 2016 Expenses: | \$ |

2016 Yearly Income and Resources

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|---------------------------------------|-----------|
| Income from Work: | \$ |
| Social Security Benefits: | \$ |
| TANF/WIC/SNAP(Food Stamps): | \$ |
| Child Support: | \$ |
| Alimony or Maintenance: | \$ |
| Unemployment Compensation: | \$ |
| Disability Benefits: | \$ |
| Pension or Retirement Benefit: | \$ |
| Workers' Compensation: | \$ |
| Refunds from Federal Loans: | \$ |
| Personal Loans: | \$ |
| Savings/Assets Used to Meet Expenses: | \$ |
| Cash/Gifts/Other Support Received: | \$ |
| Other (specify): _____ | \$ |
| *Total 2016 Income: | \$ |

***The Following Section MUST Be Completed if the Total Reported Expenses Exceed the Total Reported Income:**

PLEASE PROVIDE AN ADDITIONAL EXPLANATION THAT WOULD HELP US UNDERSTAND HOW YOUR FAMILY MET YOUR LIVING EXPENSES DURING 2016:

Certification and Signatures

Each person signing this worksheet certifies that all of the information on it is complete and correct. **I understand that once this information is submitted it cannot be amended without supporting documentation.** The student and one parent must sign and date this form.

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| WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both. | STUDENT SIGNATURE: | DATE: |
| | PARENT SIGNATURE: | DATE: |