

Documentation of Income Worksheet 2024–25

Student Name	Stu	dent ID #
Please itemize your	ou and/or your family reported on your FAFSA form appears to be insufficier income and expenses below. We cannot continue to process your application urned. Please attach any supporting documentation.	
	Custodial Parent Monthly Living Expenses for 2	022
	Mortgage or Rent	\$
	Utilities	\$
	Food	\$
	Education/Tuition Payments	\$
	Transportation	\$
	Other (please specify)	\$
	Total Monthly Expenses	\$
	x12 =	\$
	Custodial Parent Yearly Income for	2022
	Income Earned from Work	\$
	Child Support Received for all Children	\$
	Alimony	\$
	AFDC or Public Assistance	\$
	Social Security Income	\$
	Veteran's Benefits	\$
	Unemployment Compensation	\$
	Disability Benefits	\$
	Pension or Retirement Distributions	\$
	Worker's Compensation Benefits	\$
	Loans, Gifts or Cash Support From	\$
	Housing/Food or Other Living Allowances (military clargy teachers)	\$
	Housing/Food or Other Living Allowances (military, clergy, teachers) Total Yearly Income	
	re greater than your income, please explain how you paid for these expenses explain your living arrangement.	1
I/we certify that a	ll of the information reported above is complete and accurate.	
Student Signature		Date
Parent Signature _		Date