

FRANKLIN PIERCE UNIVERSITY
OFFICE OF STUDENT FINANCIAL SERVICES
2008 - 2009

VERIFICATION OF LOW INCOME FOR 2007

____Parent ____Student

STUDENT NAME: _____ SS#: _____

The 2007 income you reported on the 2008-2009 Free Application for Federal Student Aid (FAFSA) appears to have been insufficient to support your household. Please itemize your income and expenses below. We are requesting that you provide an explanation as to how you were able to meet your expenses on the income you reported. Please use the comment section to provide any explanations you feel is necessary to clarify the information you reported.

MONTHLY INCOME/BENEFITS - 2007

MONTHLY EXPENSES FOR 2007

Income earned from work: \$ _____
AFDC/Welfare Benefits: \$ _____
Social Security Benefits: \$ _____
Food Stamps: \$ _____
Fuel Assistance: \$ _____
Housing Subsidies: \$ _____
Child Support: \$ _____
Alimony: \$ _____
Support from Parent/Relative: \$ _____
Gifts: \$ _____
Other _____: \$ _____

Rent/Mortgage: \$ _____
Food Expenses: \$ _____
Utilities: \$ _____
Auto Expenses: \$ _____
Child Care Exp: \$ _____
Credit Card Exp: \$ _____
Installment Loans: \$ _____
Medical Expenses: \$ _____
Personal Expenses: \$ _____
Other _____: \$ _____
Other _____: \$ _____

TOTAL MONTHLY INCOME: \$ _____

TOTAL EXPENSES: \$ _____

Comments: _____

I (we) certify that the information provided above is complete and correct.

Student's Signature

Date

Spouse's Signature (if applicable)

Date

Parent(s) Signature (if applicable)

Date