



Student's Name: _____ CoSCC ID A _____
First, MI, Last

You are receiving this verification request because the income reported on your FAFSA is below the federal estimate of your annual cost of living for 2008. In the boxes provided below, please itemize the sources of income and expenses for you/your parent(s) during 2008. Once completed and signed, return this form to the Financial Aid Office. Your aid will not be processed until documentation has been received and evaluated.

Person with low/zero income is:

- You Your Spouse Your Father/Stepfather Your Mother/Stepmother

Be sure to fill in each box even if the answer is 'zero' or 'n/a'.

Monthly Living Expenses for 2008		
Expense	Amount Per Month	Source for Payment <small>(Please specify if from wages, business, savings, cash from loan, child support, alimony, gift, etc.)</small>
Rent/Mortgage (include property taxes and home owner's insurance)	\$	
Utilities (heat, electricity, water, phone, cell phone, cable, internet, etc.)	\$	
Food (do not include food stamps)	\$	
Transportation (gas, car payment, car insurance, maintenance, etc.)	\$	
Insurance (medical, life, etc.)	\$	
Loan payments, credit card payments, etc.	\$	
Vacation/Entertainment/Recreation	\$	
Total Monthly Expenses	\$	
Total Yearly Expenses <small>(monthly expenses x 12)</small>	\$	

Additional comments:

I certify that the information provided on this form is true and complete to the best of my ability. I understand that if I purposely give false or misleading information, I may be **fined up to \$20,000, sent to prison or both.**

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____