

Wayne Community College

2011-2012 Low Income Verification Form

The 2010 income reported on your 2011-2012 FAFSA appears to be too low to support the number of people in the household. Complete this form to provide information that explains how you and your spouse **OR** your parent(s) (*for dependent students*) were able to live and support the family in 2010. While it may be difficult to determine some of these figures, it is important to provide the most accurate information. **PLEASE DO NOT LEAVE BLANKS:** If an item doesn't apply to you, enter -0- or N/A

Student Name

Student ID or SSN

Section 1:

Did anyone in the household receive income from working or from other sources in 2010? (*Submit supporting documentation, if applicable*)

Source Of Income	Amount Rcvd. During 2010	Name of person who received this income (Please indicate relationship to you)
a. Earnings from work (<i>submit copies of all W2's, 1099's, etc.</i>)		
b. Unemployment Compensation (<i>submit 1099-G</i>)		
c. Child Support		
d. Alimony		
e. Financial Aid- <i>in excess of school expenses</i>		
f. Other: _____		

Section 2:

Did anyone in the household receive any of the following types of public assistance in 2010? (*Submit supporting documentation, if applicable*)

Type of Benefit	Amount Rcvd. During 2010	Name of person who received this benefit (Please indicate relationship to you)
a. SSI or Social Security		
b. AFDC/TANF		
c. Food Stamps		
d. WIC		
e. Free/Reduced Price Lunch		
f. Subsidized Housing (HUD, Section 8, etc.)		

Section 3:

Were you (or your spouse) incarcerated during 2010?

No

Yes – From _____ to _____ (*provide sources of income received in Sections 1 and 2 for any period during 2010 during which you or your spouse were not incarcerated*)

****Continued on Reverse****

Section 4:

If you (and your spouse **OR** parents) **were not employed** and **did not receive any untaxed income** during 2010, but lived with individuals who provided support, you must indicate a dollar value to assess that support. ***To do this, you will need to discuss the monthly expenses with the head of the household.*** PLEASE DO NOT LEAVE BLANKS: If an item doesn't apply to you, enter -0- or N/A

Type of Expense	Monthly Amount	Name of Individual Who Pays this Expense	Relationship to You (self, parent, etc.)
a. Housing (rent/mortgage)			
b. Utilities (electric, gas, water)			
c. Food			
d. Phone, Internet, Cable			
e. Medical, Dental			
f. Child Care			
g. Auto (car payment, insurance, maintenance, etc.)			
h. Transportation (gas, bus ticket, etc.)			
i. Personal (clothes, credit cards, personal hygiene items, etc.)			
j. Other: _____			
TOTAL MONTHLY EXPENSES			

How many months did you reside in the household during 2010? _____

Is your name on the mortgage/lease agreement? Yes No How many adults lived in the household in 2010? _____

CERTIFICATION: Read carefully before signing

I hereby certify that all information contained in this document, including supporting documentation is true and complete to the best of my knowledge. I understand that if I am found to have knowingly or intentionally given false or fraudulent statements and/or documentation, my eligibility for federal and state aid may be further verified and corrected as required.

WCC reports all suspected cases of fraud in any attempt for the sole purpose of qualifying and/or collecting financial aid to the U. S. Department of Education for possible investigation by the Office of Inspector General and possible prosecution by an appointed United States Attorney for sentencing of fines, imprisonment, or both.

Student Signature

Date

Parent Signature (Required for Dependent Students)

Date

**** Incomplete information or missing documentation WILL delay processing your request for financial aid ****

RETURN THIS COMPLETED FORM AND SUPPORTING DOCUMENTATION TO:

**Wayne Community College
Financial Aid Office
PO Box 8002
Goldsboro, NC 27533-8002
Fax: 919-736-9425**