

SOURCE OF INCOME WORKSHEET 2013-2014 OFFICE OF SCHOLARSHIPS AND FINANCIAL AID

Student Name			Student ID	
Please complete each section and check all that apply. DO NOT COMPLETE GRAY SECTIONS.				
	STUDENT	Estimated Monthly Amount	PARENT or SPOUSE (circle "parent" or "spouse")	Estimated Monthly Amount
Living Arrangements	☐ Lives alone ☐ Lives with Parent/Relatives ☐ Lives with Friends		☐ Lives alone ☐ Lives with Parent/Relatives ☐ Lives with Friends	
Employment Status	I did not have a job last year but have one now.		My parent/spouse did not have a job last year but has one now.	
Sources of Income	☐ Job		☐ Job	
	☐ Welfare Benefits Submit DHS Statement		☐ Welfare Benefits Submit DHS Statement	
	☐ Child Support		☐ Child Support	
	Social Security/SSI Benefits (Submit statement of benefits)		Social Security/SSI Benefits (Submit statement of benefits)	
	Unemployment Benefits (Submit statement of benefits)		UnemploymentBenefits (Submit statement of benefits)	
	☐ Pension/Annuity Submit 1099		Pension/Annuity Submit 1099	
	☐ Odd Jobs		☐ Odd Jobs	
	Other		Other	
Non-Cash Benefits (Check All that Apply)	□ Food Stamps (Submit DHS statement) □ WIC/Focus HOPE □ Section 8/Subsidized Housing □ Full Time student receiving Financial Aid		□ Food Stamps (Submit DHS statement) □ WIC/Focus HOPE □ Section8/Subsidized Housing □ Full Time student receiving Financial Aid	
Student Signature			Date	
Parent/Spouse Sig	gnature		Date	