

**MARIAN UNIVERSITY**  
———— Indianapolis ————®

**2019-20 Low Income Verification Worksheet**

Student: \_\_\_\_\_ ID: \_\_\_\_\_

Your 2019-20 FAFSA reflects unusually low income in 2017 for your family. Please complete this worksheet and return it to the Office of Financial Aid. We cannot continue to process your file until we have received this worksheet.

How do you pay for food, rent, medical expenses, utilities, etc. each month?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you receive money from family or friends, how much did you receive from them monthly in 2017?

\_\_\_\_\_  
\_\_\_\_\_

	<b>Student</b>	<b>Parent</b>
Income earned from work in 2017	\$	\$
Child support received in 2017	\$	\$
Social security benefits received in 2017	\$	\$
TANF benefits received in 2017	\$	\$
Amount of monthly rent paid	\$	\$

**I certify that the information provided above is correct.**

\_\_\_\_\_  
Student Signature                                      date                                      Parent Signature (if dependent)                                      date