Get There.

CENTRAL PIEDMONT COMMUNITY COLLEGE

Financial Aid/VA Office
P.O. Box 35009
Charlotte, North Carolina 28235-5009
Telephone: (704) 330-6942
Fax: (704) 330-5053

LOW INCOME VERIFICATION FORM FOR INDEPENDENT STUDENTS WITH DEPENDENTS OTHER THAN A SPOUSE 2012-2013

Student Name _____ **Student ID #** _____
Last First MI

Telephone _____ **Email** _____

The income that you reported for your 2012-2013 Student Aid Report (SAR) appears insufficient to support the number of people in your household. Please complete this form to clarify how you will support your family during the period of 2012-2013. Briefly explain how you will provide for such needs as housing, food, utility bills, and clothing. Please attach a separate sheet of paper if additional space is needed.

Section A: Income 2012-2013

Please submit documentation of income including W-2's, 1040 forms, most recent check stubs with a year-to-date summary, 1099's or a statement from your employer detailing your earnings.

Enter amount per month (you may need to project for July 1, 2012 – June 30, 2013)

Jul 2012		Aug 2012		Sept 2012	
Oct 2012		Nov 2012		Dec 2012	
Jan 2013		Feb 2013		Mar 2013	
Apr 2013		May 2013		Jun 2013	
				Yearly Total	

Section B: Expenses for 2012-2013

Please provide copies of rental or mortgage agreements, utility bills, canceled checks for grocery purchases, and other documentation of expenditures.

Enter amount per month (attach a separate sheet of paper if additional space is needed)

Housing Status: ☐ Rent ☐ Own	
Utilities (average amount)	
Food (average amount)	
Recreation (average amount)	
Medical	
Auto maintenance (average amount)	
Major payments prorated (auto insurance, credit cards, etc….)	
Miscellaneous (specify)	
Monthly Total	

Note: If someone else is providing support for you and/or the child, please provide a notarized statement from the individual indicating how much they provide.

Section C: Certification Statement

☐ **I certify that the information I have provided is true and accurate.**

Student Signature: _____ **Date:** _____

Do not mail any documents to the U.S. Department of Education.
Submit all requested documentation to CPCC's Financial Aid Office by fax (704.330.5053).
You should make a copy of this worksheet for your records.

PRINT

Warning: ***According to the U.S. Department of Education, if you purposely give false or misleading information on form, you may be subject to a fine of up to $20,000 or imprisonment for up to 5 years, or both.***