

Student Name: _____ **Student ID #:** _____

2017-2018 (July 1, 2017 – June 30, 2018 / Tax & Calendar Year 2015)

PART A: UNTAXED OR UNREPORTED MONETARY ASSISTANCE:

A review of your financial aid file has determined that the income reported on the Free Application for Federal Student Aid (FAFSA) is insufficient to provide basic average living expenses (such as food, clothing, shelter and other necessities) based on your household size. Unusually low income can sometimes indicate unreported financial resources.

Pease complete the table below in order to provide further explanation.

Enter Student Information Here	<h2>Report Annual Amounts</h2>	Enter Spouse or Parent Information Here
\$	Earnings from work under a cooperative education program offered by a college not reported on the taxes.	\$
\$	Earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships not reported on the taxes.	\$
\$	Student grant and scholarship aid not reported on the taxes . Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.	\$
\$	Workforce Investment Act (WIA) educational benefits, Trade Adjustment Assistance (TAA), sponsorships, or other tuition assistance program benefits	\$
\$	Veterans' education benefits (BAH, book stipend, tuition payments, etc.)	\$
\$	Veterans non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances	\$
\$	Combat pay or special combat pay. Only enter the amount that was untaxed and not included in your adjusted gross income.	\$
\$	Payments to tax-deferred pension and retirement savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H, and S	\$
\$	Yearly amount of flexible spending and dependent care accounts	\$
\$	Untaxed retirement benefits not reported on your taxes or elsewhere on this form	\$
\$	Child support received for all children. Do not include foster care or adoption payments.	\$
\$	Foreign earned income exclusion from IRS Form 1040---line 21 ("2555-EZ" will be noted next to the amount)	\$
\$	Housing, food, and other living allowances paid or provided by your employer (including cash payments and cash value of benefits and on-base military housing or a military housing allowance)	\$
\$	Money received from an inheritance, insurance or lawsuit settlements or payouts. Include alimony payments.	\$
\$	Workers' compensation or disability benefits	\$
\$	Money received, or paid on your behalf for bills in your (or your spouse's) name not reported elsewhere on this form. This includes but is not limited to money that you received from your child's other parent whose financial information is not reported on your FAFSA and that is not part of a legal child support agreement, money from an organization, or money from a friend or family member.	\$

Enter Student Information Here	Report Annual Amounts (Table Continued)	Enter Spouse or Parent Information Here
\$	Social Security benefits received that were not taxed (such as SSI), for all household members. Report benefits paid directly to student (or spouse) or parent and benefits paid to the student (or spouse) or parent for a child in your household in the appropriate column.	\$
\$	Temporary Assistance for Needy Families (TANF)	\$
\$	SNAP benefits	\$
\$	Subsidized housing (e.g. Section 8)	\$
\$	Money received as a gift	\$
\$	Any other monetary untaxed income. Type: _____	\$

PART B: IN-KIND SUPPORT:

In-kind support is defined as paid or given in goods, commodities, or services instead of money, for example, friends or relatives giving someone food or allowing him to live with them rent-free.

Please describe any in-kind support you and your family received during the appropriate calendar year. *Attach a separate sheet if additional space is needed.*

PART C: SIGNATURE & CERTIFICATION

By providing signatures, you are certifying that all of the information on this form is complete and correct. You are also authorizing Central Piedmont Community College to make corrections to your original and/or subsequent applications based on the documents you are now submitting.

Student's Signature

Date

Spouse's Signature *or*

Date

Parent's Signature (required if the student is dependent)

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