## 2018-2019 Additional Information Request – Household Size

Student Name:			_ Student ID#:	
additio depen	onal information to complete	verification of your financial ksheet who were not claime	of Financial Assistance, we must req aid file. It appears that you have listed d on the tax return, or who may be a eelse.	ed
Please	e answer the following question	ns regarding:		<u></u> .
1.	Does the individual(s) listed a	above currently live with you	(or your parents if you are depende	nt)?
2.	If yes, when did he/she/they	move in? Date moved in:		
3.	Will he/she/they live there the	nrough June 30, 2019?	YesNo	
4.	Do he/she/they receive more dependent)?Yes		support from you (or your parents if	you are
5.	For each individual listed above, provide his/her monthly income and source of income. Include all income such as wages, SSI, TANF, child support, financial aid, etc. Attach an extra sheet if needed.			
	Name:	Monthly Income \$	Source:	
	Name:	Monthly Income \$	_Source:	
6.	For each individual listed above, provide their estimated monthly expenses. Include all expenses such as rent/housing, food, personal necessities, etc. Attach an extra sheet if needed.			
	Name:	Monthly Expenses \$_	Source:	
	Name:	Monthly Expenses \$_	Source:	
7.	Please briefly explain why the individuals listed above did not claim themselves on their own 2016 federal tax return, or were not claimed by their parents, if applicable:			
	By signing this document, I certify that the information reported above is complete and accurate. I also understand that if I give false or misleading information, I may be fined, sentenced to jail, or both.			
	Student Signature:		Date:	
	Parent Signature (if depende	ent):	Date:	